



BOOKING FORM FOR MARRIAGE IN RIVERSTOWN PARISH

Date of Marriage: _____

Date Booked: _____

Time of Marriage: _____

Day of the week of marriage: _____

Priest Officiating: _____

Address & Contact Number: _____

Place/Church of Marriage: Sooeey Riverstown

Groom: _____

Address: _____

Tel: _____ Email: _____ Signature _____

Name of the Parents: _____

Bride: _____

Address: _____

Tel: _____ Email: _____ Signature _____

Name of the Parents: _____

Preferred Contact Tel No: _____

We look forward to assisting you in whatever way possible on this sacred day in your lives.

The Parochial House, Sooeey, Via Boyle, Co. Sligo. F52 RC67

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