

**OCDS Central Office
510 North El Molino Street
Alhambra, CA 91801**

GROUP NAME	_____
-or- COMMUNITY NAME	_____
ADDRESS	_____
WHERE PERFORMED	_____
CEREMONY DATE	_____

1. **NAME** _____ (Name of Patron Saint or Paschal Mystery of Choice)

ADDRESS _____
 ADMISSION **TEMPORARY PROMISE** **DEFINITIVE PROMISE** **VOWS**

2. **NAME** _____ (Name of Patron Saint or Paschal Mystery of Choice)

ADDRESS _____
 ADMISSION **TEMPORARY PROMISE** **DEFINITIVE PROMISE** **VOWS**

3. **NAME** _____ (Name of Patron Saint or Paschal Mystery of Choice)

ADDRESS _____
 ADMISSION **TEMPORARY PROMISE** **DEFINITIVE PROMISE** **VOWS**

4. **NAME** _____ (Name of Patron Saint or Paschal Mystery of Choice)

ADDRESS _____
 ADMISSION **TEMPORARY PROMISE** **DEFINITIVE PROMISE** **VOWS**

5. **NAME** _____ (Name of Patron Saint or Paschal Mystery of Choice)

ADDRESS _____
 ADMISSION **TEMPORARY PROMISE** **DEFINITIVE PROMISE** **VOWS**

6. **NAME** _____ (Name of Patron Saint or Paschal Mystery of Choice)

ADDRESS _____
 ADMISSION **TEMPORARY PROMISE** **DEFINITIVE PROMISE** **VOWS**

(Officiating Priest's Signature)

(Print in CAPS - Name of Priest)