



## Preparing for Marriage Application

### Scottsdale Bible Church

Date of Application: \_\_\_\_\_

Proposed wedding date: \_\_\_\_\_

**HIS** Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Best contact phone: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Occupation: \_\_\_\_\_

**PLEASE PRINT YOUR EMAIL CLEARLY** Primary e-mail: \_\_\_\_\_

Number of previous marriages: \_\_\_\_\_ If divorced, for how long? \_\_\_\_\_

If you are divorced, did you have biblical grounds for divorce? Please explain.

\_\_\_\_\_

Have you sought reconciliation with your former spouse? \_\_\_\_\_

Children from a previous relationship? # Boys: \_\_\_\_\_ # Girls: \_\_\_\_\_ Do you have physical custody? \_\_\_\_\_

Ages of children: \_\_\_\_\_

If previously married, are you willing to discuss it? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, in the discussion, the following scriptures regarding marriage and divorce will be reviewed:

I Corinthians 7:12-16

Matthew 5:31-32

Matthew 19:1-9

Deuteronomy 24:1-4

Mark 10:1-12

Luke 16:18

I Corinthians 7:39

Home Church: \_\_\_\_\_ How often do you attend? \_\_\_\_\_

On a scale of 1-10 (1 = not sure; 10 = absolutely positive), how sure are you you'd go to heaven if you died today? \_\_\_\_\_

Please share below how you came to have a personal relationship with Christ (circumstances or events leading up to it), including your understanding of Jesus Christ, faith and the Gospel; your biblical understanding of marriage and your reasons for wanting to get married.

HER Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Best contact phone: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Occupation: \_\_\_\_\_

**PLEASE PRINT YOUR EMAIL CLEARLY** Primary e-mail: \_\_\_\_\_

Number of previous marriages: \_\_\_\_\_ If divorced, for how long? \_\_\_\_\_

Have you sought reconciliation with your former spouse? \_\_\_\_\_

If you are divorced, did you have biblical grounds for divorce? Please explain.

\_\_\_\_\_

Children from a previous relationship? # Boys: \_\_\_\_ # Girls: \_\_\_\_ Do you have physical custody? \_\_\_\_\_

Ages of children: \_\_\_\_\_

If previously married, are you willing to discuss it? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, in the discussion, the following scriptures regarding marriage and divorce will be reviewed:

I Corinthians 7:12-16

Matthew 5:31-32

Matthew 19:1-9

Deuteronomy 24:1-4

Mark 10:1-12

Luke 16:18

I Corinthians 7:39

Home Church: \_\_\_\_\_ How often do you attend? \_\_\_\_\_

On a scale of 1-10 (1 = not sure; 10 = absolutely positive), how sure are you you'd go to heaven if you died today? \_\_\_\_\_

Please share below how you came to have a personal relationship with Christ (circumstances or events leading up to it), including your understanding of Jesus Christ, faith and the Gospel; your biblical understanding of marriage and your reasons for wanting to get married.

## Your Relationship

Are you currently living together? Yes \_\_\_\_ No \_\_\_\_ If yes, how long? \_\_\_\_\_ Years \_\_\_\_\_ Months

Are you sexually active? Yes \_\_\_\_ No \_\_\_\_

Are you willing to enter into a covenant pledging your sexual abstinence until your wedding? Yes \_\_\_\_ No \_\_\_\_

Proposed Date of Wedding: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Proposed Wedding Location: \_\_\_\_\_

Officiating Pastor: \_\_\_\_\_ Pastor's Email: \_\_\_\_\_

Has any pastor declined to perform your marriage ceremony? Yes \_\_\_\_ No \_\_\_\_

How has your faith impacted your relationship so far?

His Response:

Her Response:

All couples have areas of strength, and areas in which they would like to grow. As you consider the topics below, please identify 2-3 areas you consider strengths **(S)** in your relationship, and 2-3 areas in which you would like to improve **(I)**.

- |   |                                    |
|---|------------------------------------|
| ____ Communication                      | ____ Resolving conflicts           |
| ____ Finances & budgeting               | ____ Social life                   |
| ____ Affection & sexuality              | ____ Family planning/child rearing |
| ____ Relationship with family & in-laws | ____ Religion/spiritual intimacy   |
| ____ Time together/companionship        | ____ Leisure time & friends        |
| ____ Commitment to marriage             | ____ Education and/or career plans |

Describe 2-3 strengths from the list above and why you see them as strengths:

Describe 2-3 growth areas from the list above and what you think will help you grow in these areas:

**To fill out this form and send it electronically, Adobe Acrobat is required. If using Acrobat, fill out the form, save, and email to [weddings@scottsdalebible.com](mailto:weddings@scottsdalebible.com). If filling out without Adobe Acrobat, your information will not be saved. Please print out and scan before emailing. You may also fill it out by hand and turn in to the Administrative Office. For any questions, contact the Wedding Senior Coordinator at [weddings@scottsdalebible.com](mailto:weddings@scottsdalebible.com) or 480.824.7238.**