

**REQUEST for DELEGATION to WITNESS MARRIAGE VOWS**  
**ST. CHARLES BORROMEIO CATHOLIC CHURCH**  
**Grand Coteau, Louisiana 70541**  
**337-662-5279**

Date: \_\_\_\_\_

Name of priest/deacon requesting delegation: \_\_\_\_\_

Church address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I request delegation to witness the vows of:

Bride: \_\_\_\_\_ Groom: \_\_\_\_\_

Wedding date and time: \_\_\_\_\_

Wedding will be held at \_\_\_\_\_ St. Charles Church or \_\_\_\_\_ Academy of the Sacred Heart

This will be a \_\_\_\_\_ wedding Mass or \_\_\_\_\_ wedding ceremony outside of Mass

Weddings are held at St. Charles only at the following times:

**Fridays** at 6:00PM or 6:30PM

**Saturdays** at 11:00 AM, 1:00PM, 6:00PM or 6:30PM

\* On Saturday evenings and vigils of Holy Days, only wedding **ceremonies** (weddings without a Mass) are permitted.

\* Weddings are not held at St. Charles during the season of **Lent**.

Rehearsal date and time: \_\_\_\_\_

Rehearsals are held at St. Charles only at the following times:

**Thursdays** at 6:00PM, 6:30PM or **Fridays** at 6:00PM, 6:30PM

I accept that it is my responsibility to deliver the completed paper work of this marriage to the rectory office of St. Charles Borromeo Church. I also will send the fully signed marriage license back to the civil authority.

Signature of priest/deacon requesting delegation:

\_\_\_\_\_

Delegation granted by: \_\_\_\_\_ date: \_\_\_\_\_