

Preliminary Premarital Counselling Questionnaire

<u>Bridegroom</u>	<u>Bride</u>
Surname: _____ Age _____	Surname: _____ Age _____
First Name: _____	First Name: _____
Address: _____	Address: _____
Phone: (home) _____ (work) _____	Phone: (home) _____ (work) _____
Occupation: _____	Occupation: _____

Marital Status: (please circle)

Single Widower Separated Divorced Single Widowed Separated Divorced

If Previously Married:

a) Duration of Marriage: _____

b) Children: ___ yes ___ no

c) Names: _____ Age _____

_____ Age _____

_____ Age _____

d) Custody of Children: ___ yes ___ no

e) Date of Divorce: _____

f) Marrying Pastor: _____

g) Church: _____

Couple History: (Answer on a separate piece of paper)

1. How long have you known each other?
2. Describe your courtship.
3. What is the extent of your sexual expression with each other and how do you feel about it?
4. Please summarize your spiritual growth, and what you believe about the person of Jesus Christ and God.