

Lance Marino
Clerk of Court
St. Charles Parish State of Louisiana
MARRIAGE DEPARTMENT

REGISTRATION OF CLERGYMAN

REGISTRANT INFORMATION:

Title: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _(_____)_____

CHURCH INFORMATION:

Church: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _(_____)_____

Date of Registration: _____

Signature: _____