



# Hawaii Catholic Engaged Encounter

## *A Wedding is a Day, a Marriage is a Lifetime*

Please mail completed form to:  
Hawaii Catholic Engaged Encounter  
91-644 Makalea St, Ewa Beach, HI 96706

Scanned and emailed forms are preferred, but  
they must be signed by the priest or deacon.

Email: [hawaii@engagedencounter.com](mailto:hawaii@engagedencounter.com)

Questions? call (808) 227-7087

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### ***Application for Financial Assistance to Attend an Engaged Encounter Weekend at a Reduced Rate***

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Date of Weekend to Attend

We want to help those in need, but our funds for financial assistance are limited. To insure that EE's funds are used properly, please provide the information below. You are welcome to submit supporting documentation, such as copies of federal income tax forms of both parties or proof of public assistance.

**Please explain why you need financial assistance**

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#### **GROOM INFORMATION**

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Full Name

Home Phone

Email Address

Cell Phone

Employer

Annual Income

Address of Employer

Check One:

☐ Full Time

☐ Part Time

Job Title/Position

**BRIDE INFORMATION**

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**Full Name****Home Phone****Email Address****Cell Phone****Employer****Annual Income****Address of Employer****Check One:**☐

Full Time

☐

Part Time

**Job Title/Position****COUPLE INFORMATION**

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**Are you already civilly married?**☐

Yes

☐

No

**Do you already have children? If so, how many and ages?****WEDDING INFORMATION**

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**Priest or Deacon Preparing You for Marriage****Parish of Priest or Deacon****Site of Wedding Reception****Number of Guests****Anticipated Cost of Reception****Of the \$425 (Oahu) / \$325 (Neighbor Island) fee, how much can you afford? (e.g., 50%)****If you would like to pay in installments, please explain how much you can pay per month. (Payments must be complete before the weekend)****SIGNATURES**

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**By signing below, I certify that the information provided is accurate and true****Date****Groom Signature****Bride Signature****Priest or Deacon Signature**

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