

GENERAL INFORMATION

Bride's Name: _____ Groom's Name: _____
Address: _____ Address: _____
Phone (H&C): _____ Phone (H&C): _____
E-mail Address: _____ E-mail Address: _____
Preferred Officiant: _____
1st, 2nd & 3rd Choices of Wedding Dates: _____
Wedding Time: _____ (Latest Wedding Time is 2 P.M.)

FACILITIES & SERVICES REQUESTED

(Specific set-up requested – You may attach a drawing)

- Wedding Ceremony Only (\$700.00) Wedding Ceremony and Reception in Fellowship Hall (\$800.00) Wedding Ceremony and Reception in Sanctuary (\$950.00)

WEDDING ARRANGEMENTS CHECKLIST

Please list the number of each below.

Maid/Matron of Honor: _____ Bridesmaids: _____ Flower Girl: _____
Best Man _____ Groomsmen: _____ Ring Bearer: _____ Ushers: _____
Hostesses: _____ Candle Lighters: _____ Soloist: _____ Guests: _____
 Name of Florist _____ Phone: _____
 Name of Photographer: _____ Phone: _____
 Name of Musician: _____ Phone: _____
 Name of Videographer: _____ Phone: _____
 Additional Services: _____
Signature: _____
(Your name constitutes your signature)

OFFICE USE ONLY

Pre-Marital Counseling Completed: Yes No
Initial Consultation Date: _____ Final Consultation Date: _____
Wedding Program Submitted: Yes No Approved: Yes No
Fees Due: Wedding: _____ Reception: _____ Equipment: _____
TOTAL AMOUNT DUE _____
Payments Received:
Deposit: _____ Date: _____ Final Payment: _____ Date: _____