



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 REQUEST

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

- Sanctuary Only \$650.00 Fellowship Hall & Kitchen Only \$500.00 Sanctuary, Fellowship Hall & Kitchen \$1,075.00

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: _____

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: _____ Media: _____
TOTAL AMOUNT DUE _____
Payments Received:
 Deposit: _____ Date: _____ Final Payment: _____ Date: _____