	<u> </u>	OR OFFICE USE O			
Inquiry Date:		Cerem	eremony Only Coord: Coord:		
☐ Tentative Rm. Res		Cermr Date	ny & Recptn		
☐ Marriage License	Rcvd	Payment Rece	<u>ived: Amt. Ck# D</u>		
· ·		Final Pmt.			
Sound Tech ☐ Not N	eeded ∠/Needed_				
	WE	DDING INFORM	ATION		
PLEASE COMPLE	= -		TURN THIS FORM TO THE CHUI	RCH OFFICE.	
Officiating	g Pastor		Wedding Day, Da	ite, Time	
*BRIDE:			Home Phone:		
*Home Address:			Work Phone:		
			Cell Phone:		
Email:					
*GROOM:			Home Phone:		
*Home Address:			Work Phone:		
			Cell Phone:		
Email:					
FACILITIES					
Renearsal Day/Da	te:				
Arrival Time:	Start Time:	End Time <u>:</u>	Departure Time:		
Wedding Day/Date	e:				
Wedding Day/Date	,				
Arrival Time:	Start Time:	End Time <u>:</u>	Departure Time:		
	No. of	Wedding Guests:			
	astor officiating or	_	Home Phone:		
*Outside Officiating Pastor:					
Officiating Pastor's Church:			Church Phone:		

(Continued on Back)

WEDDING INFORMATION cont...

*Maid/Matron o	f Honor/Witness:		
*Home Address	S:		
*Best Man/Witr	ness:		
*Home Address	3:		
	ng of the individual's lega	_	PLEASE make sure it is the orrect address, state and zip
Organist:			
Soloist(s):			
Father/Mother of the Bride:			Phone:
Father/Mother	of the Groom:		Phone:
Florist/Decorate	or:		Phone:
Flowers:	☐ Leave for Church	☐ Take for Recep	otion
Photographer:			Phone:
Pictures:	☐ Before Wedding	□After Wedding	Time:
AFTER THE W To the Bride / 0 Will you be cha		ease indicate after	-wedding name:
	Bride:		
	Groom:		
What will be yo	ur mailing address after th	e wedding?	