



323 Temple St. New Haven, CT, 06511, 203-787-4195, www.UnitedNewHaven.org

Application Form for Weddings at United Church on the Green

Couple's Names: _____

Faith Affiliations: _____

Primary Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Wedding Date Requested: _____ Time (3 hours) _____

Rehearsal Date Requested: _____ Time (1 hour) _____

- Number of People You Expect to Attend Your Wedding: _____
- Do You Wish to Use Our Regular Music Program? _____
- Or Use Your Own Program? (Which must be approved by Our Music Director) _____
- Please Indicate Any Special Setup Needs: _____
- Arrangements for small receptions within our facilities are possible. Please contact our Operations Director for details.
- How did you hear about UCG? _____

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For UCG Reference Only

Date of initial request: _____

Date of Conversation with Senior Minister: _____ with Music Director: _____

Deposit received: \$ _____ Date: _____ UCG: _____

Sexton Assigned: _____ Hours: _____

Amount due at rehearsal: \$ _____ Received by: _____