United Parish of Winchendon

39 Front Street Winchendon, MA 01475 978.297.0616

Wedding Information Record

Date of Ceremony	Date:	Time:
Location of Ceremony	Here at the United	d Parish:
Bride's Name:		
Gender: Male Fe		
Street; Number		
Town:		
Email:		
Phone: cell	land	lline
Groom's Name:		
Gender: Male Fer	nale	
Street; Number		
Town:		
Email:	· · · · · · · · · · · · · · · · · · ·	
Phone: cell		lline
Maid/Matron of Honor		
Street; Number		
Town:		
Phone: cell		

Best Man	
Street; Number	
Town:	
Email:	
Phone: cell	landline
Minister Name (If having other offici	iate):
Phone # :	Email:
Credentials:	
Ordained: Licensed:	Certified:
Will the officiated be able to meet with	th the United Parish Pastor to review church use
guidelines?	
You are asking to use the church for	your wedding ceremony. Your wedding signifies you are a
person of Christian faith. All aspects	of the ceremony and decorations will be in the sacred
Christian tradition. Thank you for adl	hering to our requirements and thank you for choosing our
church, The United Parish, to be apa	art of your sacred celebration on your wedding day.
May God Bless you and your marria	ge together!

In His service,

The United Parish Church Of Winchendon