APPLICATION FOR CHURCH WEDDING

Today's Date				
Name of Bride/Groom		Previously Married?		
Address	City		St	Zip
Church Affiliation				
Daytime Phone	Evening Phone			
E-mail				
Name of Bride/Groom			Previo	ously Married?
Address	City		St	Zip
Church Affiliation				
	Evening Phone			
E-mail				
Future Residence				
Best Man	Maid/Matron	of Honor _		
Desired Date of Wedding		Time		
Place: Sanctuary: Chape	el:	Other:		
Desired Date of Rehearsal	Time			
Special Music (soloists, instrumentalist,	etc.) Yes	No	_	OFFICE USE ONLY
Reception in Fellowship Hall	Yes	No	_	Fee Received \$
Member? Yes No	Deposit \$	(\$40.00)	Date Received Conference Date:	
Signatures:				
Bride/Groom				
Bride/Groom				

