Bethany Church of Wanchese

Wedding Application Form

Groom:

Name: _____

Address: _____

_____

Phone Number: ( )_____

E-Mail: _____

Date of Birth: _____

Occupation: _____

Church Membership: _____

Parent's Name: _____

Address: _____

_____

Phone: _____

Bride:

Name: _____

Address: _____

_____

Phone: ( )_____

E-Mail: _____

Date of Birth: _____

Occupation: _____

Church Membership: _____

Parent's Name: _____

Address: _____

_____

Phone: _____

Confirmation from Pasor _____ Date _____

I request:

Date of Wedding _____ Hour _____ Place _____

Officiating Minister: _____ Organist: _____

Address if not Pastor of Bethany Church _____

Photographer: _____ Florist: _____

Will you need the use of the Fellowship Hall for either the Rehearsal Dinner? Y___N___ Reception? Y___N___

Caterer (if reception is here), Music, and Other Details:

_____

_____

_____

Rehearsal: _____ Hour: _____ Wedding Director: Confirmed by Wedding Coordinator of Bethany

ADDITIONAL INFORMATION:

_____

_____

_____

The above constitutes my request for services from Bethany Church. I understand that I should not announce dates, times and places until I have written confirmation from Bethany Church. Deposit Fee and Use of Facilities Fee should be remitted with this application.

Fee Amount with Form _____ Ck#_____ Signature: _____

(Bride or Groom)