

**FIRST UNITED METHODIST CHURCH
WEDDING APPLICATION**



WEDDING DATE & TIME: _____

REHEARSAL DATE & TIME: _____

GROOM: _____ **PHONE:** _____ (Home)

ADDRESS: _____ (Work)

_____ **E-MAIL:** _____

BRIDE: _____ **PHONE:** _____ (Home)

ADDRESS: _____ (Work)

_____ **E-MAIL:** _____

RELATIONSHIP (if any) WITH FIRST UNITED METHODIST CHURCH: _____

OFFICIATING MINISTER: _____

PLACE OF RECEPTION: _____

No. of Bridesmaids (including Maid/Matron of Honor): _____

No. of Groomsmen (including Best Man): _____

Wedding Coordinator: _____

Florist: _____

Photographer: _____

Organist _____

(Must be approved by FUMC Organist or Director of Music Ministries)

Address after wedding: _____

The back side of this form must be read and signed before returning this form to the church office.

FOR OFFICE USE ONLY:	Deposit Paid: _____
Date approved: _____ Approved by: _____	Balance Paid: _____
Copy to: ___ Minister ___ Church Office ___ Church Hostess ___ Organist ___ ELC Director	
___ Custodian ___ Sound Technician ___ Copies Distributed	