

CLINTON PRESBYTERIAN CHURCH - WEDDING INFORMATION FORM

Bride Information

Groom Information

Name _____
Address _____
Phone (Home) _____ (Work) _____
Place of Employment _____
Date of Birth _____
Denomination _____
Home Church _____

Name _____
Address _____
Phone (Home) _____ (Work) _____
Place of Employment _____
Date of Birth _____
Denomination _____
Home Church _____

Rehearsal Date _____ Time _____ Will there be a rehearsal dinner? _____ Where? _____

Who, if anyone, from the staff will be invited? _____

Wedding Date _____ Time _____ Location _____

Officiated By _____ Single Ring _____ Double Ring _____

of Attendants: Men _____ Women _____ Ring Bearer? _____ Age _____ Flower Girl? _____ Age _____

Best Man _____ Maid/Matron of Honor _____

Will the bridal party dress at the church? Women: Yes _____ No _____ Men: Yes _____ No _____

Expected time of arrival at church? _____

Florist _____ Photographer _____

Will you pick up the flowers after wedding? Yes _____ No _____ Will pictures be Before _____ After _____ wedding?

Will candles be used? Yes _____ No _____ (The church does not provide candelabra. Drip less candles must be used.)

Will there be an organist? Yes _____ No _____ (If yes, the church's organist must be used.)

Music Desired _____

Soloist Desired? Yes _____ No _____ Name of Soloist _____

Solo Selections _____

Will you require the church sound system? Yes _____ No _____ (If yes, the church's sound system operator must be used)

Will you be using special bulletins? Yes _____ No _____ Will the church be asked to prepare them? Yes _____ No _____

Will there be a reception held at the Church? Yes _____ No _____ If yes, Fellowship Hall _____ Westminster Hall _____

Will the church kitchen be used? Yes _____ No _____ (If yes, a qualified church member must be present.)

Any Special Arrangements? _____

We have read the Wedding Policy Sheet, understand and agree to abide with the policies of the Clinton Presbyterian Church.

Bride Signature _____ Groom Signature _____

Non Members, please note fees listed on the Wedding Policy Sheet

Pastor, please fill out reverse side.

For church office use only:

License No. _____ Date _____ Witnessed By _____

Fees Paid? Yes _____ No _____ Date _____ Amount _____ Check No. _____ Cash _____

Services Paid For _____

Organist Notified/Date _____ Custodian Notified/Date _____

Pastor Signature _____