

Office Use:

Contact Date: _____

**Wedding Information
(Initial Request)**

Minister: _____

Person requesting wedding date: _____

Bride () Groom () Other () Phone _____

Bride: _____

Address: _____

Phone: Home: _____ Work: _____

Groom: _____

Address: _____

Phone: Home: _____ Work: _____

Wedding Date Request

Office Use: Church Availability

Month Day Year Time Yes No

First Choice: _____

Second Choice: _____

Rehearsal Date: _____

Yes No

Request for Fellowship Hall: _____

Member of GBUMC

Attends GBUMC

Yes No

Yes No

Bride: _____

Bride: _____

Groom: _____

Groom: _____

Family: _____

Family: _____

Request for Minister (Please indicate your choice.)

Rev. Tim Craig: _____

Rev. Amanda Webber: _____

Both Ministers: _____

Other Minister: _____

Comments: _____

Office Use Only:				
Office Comments:		Availability	In	Out
	Tim	_____	_____	_____
	Amanda	_____	_____	_____
	Jennifer	_____	_____	_____
	Angie	_____	_____	_____