

BRIDE'S Name			Home Phone	
Address			Cell Phone	
City	State	Zip +	First marriage? YES Age	
			-	
Church Background		Ema	il address	
Employer			Work Phone / Extension	
Father			Home Phone / Alternate Phone	
Mother			Home Phone / Alternate Phone	
GROOM'S Name			Home Phone	
Address			Cell Phone	
City	State	Zip +	First marriage? YES Age	
Church Background			Email address	
Employer			Work Phone / Extension	
Father			Home Phone / Alternate Phone	
Mother			Home Phone / Alternate Phone	
INISTER'S Name & Affiliation			Phone	
Date of Wedding			□ 1:00 pm □ 3:00 pm	
mo Contact the church to scheo	nth day year Iule a rehearsal date and time.	day of the week	time	
Please fill out this form com final fees. Make your check	pletely and return it immediately with t or money order (no cash, please) paya	he \$300.00 deposit fee. This r ble to Pilgrim Congregational C	non-refundable deposit will be deducted fro hurch. Thank you.	om you
Special Notes				

500 Building Fees	OFFICE USE ONLY			
250 Staff Fees \$ 750 Total Fees	\$ 750.			
Deposit paid on	_ \$ 300.			
Balance due before rehearsal date				
CHECK payable to:PILGRIM CHURC	^ж \$ 450			