

**WEDDING CONTRACT**

We agree to the above terms of the wedding agreement. We ask to reserve the following date for our wedding \_\_\_\_\_.

We wish to use the following parts of the building for the wedding

Sanctuary

Fellowship Hall

Kitchen

We further understand that failure to satisfy the requirements of the contract will result in a cancellation of the wedding at the church.

Signed \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

Deposit (\$100) \_\_\_\_\_

Name(s) of officiating clergy \_\_\_\_\_

Bride's Name: \_\_\_\_\_ Age \_\_\_\_\_ Marital Status \_\_\_\_\_

Bride's Address \_\_\_\_\_  
\_\_\_\_\_ Zip Code \_\_\_\_\_

Bride's Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Groom's Name \_\_\_\_\_ Age \_\_\_\_\_ Marital Status \_\_\_\_\_

Groom's Address \_\_\_\_\_  
\_\_\_\_\_ Zip Code \_\_\_\_\_

Groom's Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Address after marriage, if known \_\_\_\_\_  
\_\_\_\_\_

Date of Wedding \_\_\_\_\_ Time \_\_\_\_\_

Single Ring \_\_\_\_\_ or Double Ring \_\_\_\_\_

Reception at Church \_\_\_\_\_ Number of Guests \_\_\_\_\_

Date of Arrangement of Conference \_\_\_\_\_ Time \_\_\_\_\_

Date(s) and time(s) of Counseling Conferences \_\_\_\_\_  
\_\_\_\_\_

Date of Rehearsal \_\_\_\_\_ Time \_\_\_\_\_

Unity Candle Ceremony \_\_\_\_\_ Communion \_\_\_\_\_ Rosebud Ceremony \_\_\_\_\_

**PERSONS IN WEDDING PARTY:**

Full Name/Best Man \_\_\_\_\_

Full Name/Maid or Matron of Honor \_\_\_\_\_

Full name & relationship of person giving bride away \_\_\_\_\_

Full Name/Ring Bearer \_\_\_\_\_

Full Name/Flower Girl \_\_\_\_\_

Number of Bridesmaids \_\_\_\_\_ Number of Ushers \_\_\_\_\_

**Please put the names of Bridesmaids and Ushers the way you want them to appear on the bulletin on the back of this sheet.**

**IMPORTANT NOTE: LICENSE MUST BE OBTAINED AT THE TOWSON COURT HOUSE**

Names of Bridesmaids

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Names of Ushers

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