

WEDDING REQUEST FORM-LIVING WAY CHURCH

Date Requested: _____

Bride's Name _____

Living Way Member: ____ Yes ____ No

Address: _____

Cell Phone _____ Email _____

Wedding Location: ____ Main Room ____ Fireplace Room ____ Outside

Time: Beginning _____ Ending _____

Reception Location: ____ Main Room ____ Fireplace Room ____ Outside

Minister's/Officiant's Name _____

Minister's/Officiant's Phone _____ Email _____

Groom's Name _____

Living Way Member: ____ Yes ____ No

Address: _____

Cell Phone _____ Email _____

Rehearsal Date: _____ Start Time: _____ End Time _____

We agree to comply with church rules and regulations regarding church weddings and church receptions. We understand that the church is not responsible for the loss of or damage to personal property used in any of the wedding activities.

Bride's Signature _____

Groom's Signature _____