

Today's Date: \_\_\_\_\_

First United Methodist Church of Marietta  
56 Whitlock Avenue, Marietta, GA 30064 (770)429-7800

WEDDING APPLICATION FORM

This form and a non-refundable deposit of \$200.00 are to be completed before a date may be reserved on the church calendar. In the event your plans change, please notify the church as soon as possible so that your date may be released for another event.

Is the Bride or Groom a Member of the Church? Yes \_\_\_\_\_ No \_\_\_\_\_

Are the Bride's or Groom's Parents Members of the Church? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please provide their name: \_\_\_\_\_

Where would you like to have your wedding?

Sanctuary \_\_\_\_\_ Chapel \_\_\_\_\_ Park/Pavilion \_\_\_\_\_ Log Chapel \_\_\_\_\_ Hodges Garden \_\_\_\_\_

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

Date of Rehearsal: \_\_\_\_\_ Time: 6:00 pm \_\_\_\_\_ 7:00 pm \_\_\_\_\_

Bride's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ E-mail: \_\_\_\_\_

Groom's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ E-mail: \_\_\_\_\_

Alternate contact: \_\_\_\_\_

Relationship: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ E-mail: \_\_\_\_\_

I have read the church wedding policies and agree to abide by these policies. I will ensure that all involved in my wedding also honor these policies.

(Bride or Groom Signature) \_\_\_\_\_

Will you be leaving your flowers for Sunday Worship Services? Yes: \_\_\_\_\_ No: \_\_\_\_\_

