

WEDDING INFORMATION FORM

WEDDING DATE _____ **TIME** _____

Wedding Location: _____

Rehearsal Date _____ Time _____

PARTY A _____ Home phone _____

Address _____ Work phone _____

City, State, Zip Code _____

Email Address _____

Religious Affiliation _____

PARTY B _____ Home phone _____

Address _____ Work phone _____

City, State, Zip Code _____

Email Address _____

Religious Affiliation _____

Party A's Parent Names _____

Party B's Parent Names _____

Location of Reception _____

Number of guests _____ Number in wedding party _____

Witnesses _____

Exchange of Rings? Y or N Other Binding Ritual _____

Florist _____ Photographer _____

If Wedding at BCC, complete one form, sign at the bottom and return to the church office with a \$200 deposit.

Address for return of deposit _____