

(Office Use Only)

- (1) Date met with PPC Pastor : _____
- (2) Date contacted Wedding Coordinator: _____
- (3) Date of Appointment: _____
- (4) Date Approved by Session: _____

PHILADELPHIA PRESBYTERIAN CHURCH
 11501 Bain School Road
 Mint Hill, North Carolina 28227
 (704) 545-6172 Fax: (704) 545-6173

WEDDING INFORMATION FORM

BRIDE

GROOM

 Work# _____ Home _____

 (Circle) Yes No

Full Name
 Address
 E-mail Address
 Birthdate
 Telephone
 Occupation
 Married Previously
 Church Membership
 Father & Mother's Name
 And Address

 Work# _____ Home _____

 (Circle) Yes No

Address after wedding _____

Date of Wedding _____ Time of Wedding _____

Place: Sanctuary or Chapel? (Circle one)

Date of Rehearsal _____ Time of Rehearsal _____

PPC Minister _____

Other Minister _____

Minister currently serving PPC shall always preside (please provide full name and address of non PPC minister)

Wedding Director _____

Time and Place of Reception after wedding, if planned _____

(If using a building at Philadelphia Presbyterian, you must fill out a Building Usage Form for additional space.)

Bride's Honor Attendant _____ Best Man _____

I have read the wedding policy book and agree to follow the policies approved by the Session of Philadelphia Presbyterian Church and any guidelines issued by the pastors of the church.

Date _____ (Signed) _____

Wedding applications cannot be approved until all information above is complete!

Please provide this information at least 60 days prior to wedding:

*Florist _____

Phone Number: _____

*Vocalist(s) _____

Phone Number: _____

*Photographer _____

Phone Number: _____

*Videographer _____

Phone Number: _____

*Caterer _____

Phone Number: _____

(*Please refer to Wedding Policy booklet for important information about these positions.)

This form must be completed and returned to the church office before submission to Session for approval.

Additional Notes:

FOR OFFICE USE ONLY

Membership verified as active/inactive/non-member (circle one) by: _____

Wedding Director: _____

Phone Number: _____

Organist: _____

Phone Number: _____

Sound System Operator: _____

Phone Number: _____

Date Application Received: _____

Date Approved by Session: _____