

Wedding Information and Reservation Form

Please fill out the following information and return with your deposit.

Date and Time of Wedding: _____

Date and Time of Rehearsal: _____

Please fill our information below on each partner

Full legal name #1 _____

Street address: _____

Best phone number to reach you? _____

e-mail: _____

Date of birth: _____

Full legal name #2 _____

Street address: _____

Best phone number to reach you? _____

e-mail: _____

Date of birth: _____

PERMANENT RESIDENCE FOLLOWING WEDDING

Street Address/City/Zip: _____

Do you have a wedding coordinator (not required)? If so please fill out the following information:

Name: _____

email: _____

Mobile phone: _____

SPECIAL REQUESTS: _____

To secure your date, a \$300 non-refundable deposit (check or money order) is needed to verify the date on the church calendar. Please make payment to Old First Reformed Church.

Amount received and date _____ Balance _____

Date balance is due _____