

Luther Memorial Church Wedding Application/Contract

Member

Non-Member

Wedding Date ____/____/____ Time _____	Rehearsal Date ____/____/____ Time _____
Please list which Saturday pre-marital session you will be attending: _____	

Bride
Full name _____
Address _____

Work phone _____
Cell phone _____
E-mail _____
Church Membership _____

Groom
Full name _____
Address _____

Work phone _____
Cell phone _____
E-mail _____
Church Membership _____

Alternate contact
Full name _____
Address _____

Relationship to couple _____
Home phone _____
Work phone _____
Cell phone _____
E-mail _____

We, the undersigned, have read and agree to comply with the wedding and building use policies of LMC as outlined in the Wedding Handbook and the decisions of the LMC Staff.

Print Name _____ Sign _____ Date ____/____/____

Print Name _____ Sign _____ Date ____/____/____

Office Use Only

Deposit Due \$ _____ Date paid ____/____/____ Amount Paid \$ _____

(50% of wedding fee) Cash Check (# _____) Credit (Visa/Mastercard/Discover)

Final Amount Due \$ _____ Date paid ____/____/____ Staff _____

Cash Check (# _____) Credit (Visa/Mastercard/Discover) Staff _____