

APPENDIX 1

APPLICATION FOR A WEDDING AT FCPC

Date this form is submitted to the church office: ____/____/____

Bride's Information

First Name: _____ Middle: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____ -- _____ Work: (____) ____ -- _____

Email Address: _____

Groom's Information

First Name: _____ Middle: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____ -- _____ Work: (____) ____ -- _____

Email Address: _____

Wedding Information

Date of Wedding: ____/____/____ Time of Wedding: _____

Date of Rehearsal: ____/____/____ Time of Rehearsal: 5:00 p.m.

Facilities Requested: Sanctuary Atrium Chapel

Is the bride or groom or their parents on the active membership roll of the Fox Chapel Presbyterian Church? Yes No

Address following wedding: _____

Facility Care Fees

For Members \$150 For Non-Members \$650

I fully understand and consent to the church's guidelines and procedures as printed in *Planning Your Wedding at Fox Chapel Presbyterian Church*.

Bride's Signature _____ Groom's Signature _____