

Wedding Application Form

Bride Information:

Bride (full name): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Chase Oaks Church Attendee: Yes No How Long? _____

Parents' Names: _____

Parents' Address: _____

Parents' Home Phone: _____

Chase Oaks Church Attendee(s): Yes No How Long? _____

Groom Information:

Groom (full name): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Chase Oaks Church Attendee: Yes No How Long? _____

Parents' Names: _____

Parents' Address: _____

Parents' Home Phone: _____

Chase Oaks Church Attendee(s): Yes No How Long? _____

Wedding Information:

Wedding Date: _____ Time: _____

Rehearsal Date: _____ Time: _____

Note: Rehearsal times are either Thursdays from 5:00 – 6:30 p.m. or Fridays from 5:00 – 6:30 p.m.

Location Requested:

- Wedding Worship Auditorium Other Location
- Rehearsal Worship Auditorium Other Location
- Reception Main Lobby Patio Student Building Other Location

Estimated # of guests: _____

Premarital Counseling (Required):

- Interested in premarital counseling at Chase Oaks Church
- Attending premarital counseling at another location

Name of Program: _____

Location: _____

Pastor:

- I would like for a pastor at Chase Oaks Church to perform our wedding.

Pastor Requested 1. _____ 2. _____

(Please list first and second choice)

- I will provide my own pastor. (Please complete an Outside Officiating Pastor Request Form)

Pastor's Name: _____ Daytime Phone: _____

We have read and understand the policies concerning weddings at Chase Oaks Church and agree to honor the guidelines.

We understand that Chase Oaks Church must receive the wedding application and a non-refundable deposit of \$150 before the wedding date will be reserved on the church calendar.

We agree to complete all financial obligations 30 days prior to the wedding.

Bride Signature: _____ Date: _____

Groom Signature: _____ Date: _____

Pastor Approval: _____ Date: _____

For Office Use Only

Financial

Church Deposit: _____ Received: _____

Balance Due: _____ Received: _____

Compensation

Facilities Personnel: _____ Sound Technician: _____ Consultant: _____

Event U Reservation: _____