REQUEST FOR WEDDING RESERVATIONS

Please fill in the Wedding Information sheet and give it to the Church Office immediately after your request to schedule your wedding.

REHEARSAL DATE:					
	(Month)	(Day)	(Year)	(Hour)	
WEDDING DATE:					
	(Month)	(Day	(Year)	(Hour)	
MINISTER:					
PLACE OF WEDDING: S	Sanctuary	Parlor	Pastor's Office		
BRIDE'S FULL NAME: _					
ADDRESS:					
HOME PHONE:			BUSINESS 1	PHONE:	
CHURCH MEMBERS	SHIP:				
GROOM'S FULL NAME:					
ADDRESS:					
HOME PHONE:			BUSINESS 1	PHONE:	
CHURCH MEMBER	SHIP:				
ADDRESS AFTER MARI	RIAGE:				
Your signature below is an a Virginia, regarding church			nd regulations of the	First Baptist Church of	Waynesboro,
Bride				Date	
				D. (

OTHER WEDDING ARRANGEMENTS: (Please complete and return to the church office at least 30 days prior to the wedding)

FLORIST:					
ARE FLOWERS TO BE LEFT FOR SUNDAY? (Please notify the church secretary AS FAR IN A	DO ADVANCE AS POSSIBLE).				
LIGHTS DESIRED: Full Brilliance Star-light					
PHOTOGRAPHER:					
WHERE WILL RECEPTION BE HELD?					
IF AT FIRST BAPTIST, WHO IS CATERER? _					
Lighting of Unity Candle? Giving flo	owers or kiss to mothers?				
WE	DDING PARTY				
Bride's Parents					
Bride's Grandparents					
Groom's Grandparents					
	_ Best Man				
Matron of Honor	Flower Girl				
Ring Bearer	_				
Bridesmaids	Groomsmen				
Soloists	Other Music				
	Other Minister				
Wedding Director	Phone				