



Wedding Inquiry Form

Please complete this form and return to the pastor or church office at your earliest convenience. Please print clearly.

Bride's Information

Full Name: _____ Date of Birth: ____/____/____

Address: _____ City, State & Zip: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Marital Status: Single, never previously married Single, divorced Single, widowed Other

Do you have children? Yes, from a previous relationship Yes, with my current fiancé No Other

Name(s) & Age(s) of child(ren): _____

Are you a member or regular attendee of Grace Church? Yes No If yes, for how long? _____

If not, do you attend another church? Yes No Name & Location: _____

Personal Testimony: When and how did you come to faith in Christ as you Savior? _____

Groom's Information

Full Name: _____ Date of Birth: ____/____/____

Address: _____ City, State & Zip: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Marital Status: Single, never previously married Single, divorced Single, widowed Other

Do you have children? Yes, from a previous relationship Yes, with my current fiancée No Other

Name(s) & Age(s) of child(ren): _____

Are you a member or regular attendee of Grace Church? Yes No If yes, for how long? _____

If not, do you attend another church? Yes No Name & Location: _____

Personal Testimony: When and how did you come to faith in Christ as you Savior? _____

Officiant's Information

Name (please include preferred title): _____

Church Name & Location: _____

Officiant's Phone: _____ Officiant's Email Address: _____

Wedding Rehearsal Information

Desired Date of the Wedding Rehearsal: Sun Mon Tues Wed Thur Fri Sat _____ / _____ / _____

Time of the Wedding Rehearsal: _____ AM / PM Full time-frame of event: _____ AM / PM to _____ AM / PM

Location of the Wedding Rehearsal: _____

Address: _____ City, State & Zip: _____

What rooms are being requested? *Please check all that apply.*

- Sanctuary Fellowship Hall Kitchen Library Nursery CE Classroom(s) FH Classroom(s)
 Other (please specify): _____ Not applicable, offsite

Will you be requiring the use of sound equipment and a technician for the wedding rehearsal? Yes No

Will you be requiring the use of media equipment and a technician for the wedding rehearsal? Yes No

Wedding Ceremony Information

Desired Date of the Wedding Ceremony: Sun Mon Tues Wed Thur Fri Sat _____ / _____ / _____

Time of the Wedding Ceremony: _____ AM / PM Full time-frame of event: _____ AM / PM to _____ AM / PM

How many people are in the bridal party? _____ How many anticipated guests will be attending? _____

Location of the Wedding Ceremony: _____

Address: _____ City, State & Zip: _____

What rooms are being requested? *Please check all that apply.*

- Sanctuary Fellowship Hall Kitchen Library Nursery CE Classroom(s) FH Classroom(s)
 Other (please specify): _____ Not applicable, offsite

Will you be requiring the use of sound equipment and a technician for the wedding ceremony? Yes No

Will you be requiring the use of media equipment and a technician for the wedding ceremony? Yes No

Please describe any special sanctuary platform equipment set-up or take-down: _____

Wedding Reception Information

Desired Date of the Wedding Reception: Sun Mon Tues Wed Thur Fri Sat _____ / _____ / _____

Time of the Wedding Reception: _____ AM / PM Full time-frame of event: _____ AM / PM to _____ AM / PM

Location of the Wedding Reception: _____

Address: _____ City, State & Zip: _____

What rooms are being requested? *Please check all that apply.*

- Sanctuary Fellowship Hall Kitchen Library Nursery CE Classroom(s) FH Classroom(s)
 Other (please specify): _____ Not applicable, offsite

Will you be requiring the use of sound equipment and a technician for the wedding reception? Yes No

Will you be requiring the use of media equipment and a technician for the wedding reception? Yes No

Those applying for use of the Grace Church facilities must either be a member or regular attendee of Grace Church or have close affiliation of a member or regular attendee. This member or regular attendee must agree to be responsible for opening and closing the facility throughout the activities of the event, and oversee its proper usage (set-up, clean-up, etc.).

Grace Church Representative's Information

Name: _____ Relationship to the applicant(s): _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Rules for Use of Church Facilities

- 1) An *approved* Application for Facility Use must be obtained prior to using any Grace Church facilities.
- 2) Gym shoes must be worn for all sport activities conducted in the gym.
- 3) Grace Church facilities may not be used after midnight.
- 4) The facilities must be left in the condition in which they were found. This includes:
 - a. Returning all tables and chairs to their original location.
 - b. Cleaning up all litter and trash and properly disposing of it in the containers provided outside at the rear of the gym. All recyclable materials, including glass, aluminum, steel and plastic containers, clean paper, cardboard, etc., must be removed from the premises.
 - c. If the kitchen is used, it must be left in the condition in which it was found (i.e., all utensils used must be washed and properly stored, counters wiped off, stove tops cleaned, etc.)
 - d. Church consumables, such as paper plates, napkins, cups, plastic forks, spoons, knives, etc., are not to be used.
- 5) There is to be no smoking in any part of the church facilities.
- 6) When leaving the building, it is the responsibility of the person in charge to ensure all lights are turned off, all thermostats are set to their original setting and the building is properly secured.

Failure to observe the above rules will result in denial of future requests for use of Grace Church Facilities.

Applicable Fees & Honorariums for Weddings

Facility Fee for Members/Regular Attenders*: NO FEE

**The Deacon Board reserves the right to determine who qualifies as a "regular attendee" of Grace Church.*

Facility Fee for Non-Members/Non-Regular Attenders: \$250

Custodial Fees: \$57/hour (This rate is based upon the current double-time rate for two custodians.)

Requested Set-Up & Take-Down Fee: \$50

Examples: Request to remove instruments or microphones from the platform, chairs be moved or rearranged, etc.

Sound & Media Technicians (Checks should be made payable to each technician and given to them directly.)

Wedding Rehearsal: \$50 first hour, \$25/additional hour per technician

Wedding Ceremony: \$100 per technician

Wedding Reception: TBD

I/We hereby request the use of Grace Church facilities for the purpose indicated. I/We agree to abide by the rules for use of church facilities, and will be responsible for paying the applicable fees in a timely manner.

Bride's Signature: _____ Date: ____/____/____

Groom's Signature: _____ Date: ____/____/____

I hereby agree to act as the representative from Grace Church for this event. I agree to abide by the rules for use of church facilities and ensure proper opening and closing procedures of the church facilities throughout this event's activities.

Representative's Signature: _____ Date: ____/____/____

FOR OFFICE USE ONLY

Interviewed By: _____ Date of Interview: ____/____/____

This request is APPROVED. This request is NOT APPROVED for the following reason: _____