

# WEDDING APPLICATION

St. Johns Presbyterian Church

1. Name of **Bride** \_\_\_\_\_ Church Affiliation \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2. Name of **Groom** \_\_\_\_\_ Church \_\_\_\_\_  
Affiliation \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

3. Name of individual making arrangements if other than Bride or Groom: \_\_\_\_\_  
Relationship \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

4. Rehearsal time desired \_\_\_\_\_ Date \_\_\_\_\_

5. Wedding time desired \_\_\_\_\_  
Date \_\_\_\_\_

6. What facilities desired?  
Sanctuary \_\_\_\_\_ Kneeling Bench \_\_\_\_\_ Peterson Fellowship Hall \_\_\_\_\_  
Chapel \_\_\_\_\_ Hurricane Globes \_\_\_\_\_ Kitchen \_\_\_\_\_  
Dressing Rooms (Bridesmaids) \_\_\_\_\_ Candelabra \_\_\_\_\_ Stove \_\_\_\_\_  
(Groomsmen) \_\_\_\_\_ # Of Candles \_\_\_\_\_

7. Name of caterer (if using church facilities for reception) \_\_\_\_\_  
Address: \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

8. Name of Florist \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

9. I wish to leave the flowers in the sanctuary for the Sunday service. Yes \_\_\_ No \_\_\_

10. Name of photographer \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

11. Name of St. Johns wedding director (To be assigned by the SJPC Wedding Coordinator) \_\_\_\_\_  
Phone \_\_\_\_\_

12. Which member of pastoral staff would you like to officiate at your wedding? \_\_\_\_\_

13. Do you wish the pastor to request another ordained minister of the gospel to assist in this service? Yes \_\_\_\_\_ No \_\_\_\_\_  
If so: Name \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
Church \_\_\_\_\_

14. Having carefully read the St. Johns Presbyterian Church "Wedding Policies and Procedures."  
**I agree to abide by the conditions in the booklet.**  
**I agree to pay all fees listed on fee schedule 2 weeks before the wedding.**  
**I agree to have the wedding license given to the pastor prior to the rehearsal.**  
Signature of Applicant \_\_\_\_\_ Date of Application \_\_\_\_\_

15. I have consulted with the St. Johns organist, Tom Gunn, (phone: 221.6837) (email: TomGunn@stjohnspresbyterian.org), as to his availability. \_\_\_\_\_

I have agreed to serve as organist. \_\_\_\_\_

I have agreed to serve as wedding \_\_\_\_\_

director. \_\_\_\_\_

APPLICATION APPROVED BY: Pastor \_\_\_\_\_ Date \_\_\_\_\_  
Chairman, Worship Committee \_\_\_\_\_ Date \_\_\_\_\_  
Clerk of Session \_\_\_\_\_ Date \_\_\_\_\_  
Payment to be made to St. Johns Presbyterian Church: Amount \_\_\_\_\_ Date \_\_\_\_\_

--OVER--

FOR OFFICE USE ONLY

Policy sent to caterer by \_\_\_\_\_ Date \_\_\_\_\_

Policy sent to florist by \_\_\_\_\_ Date \_\_\_\_\_

Policy sent to photographer by \_\_\_\_\_ Date \_\_\_\_\_

Scripture selected: \_\_\_\_\_

Hymn selected: \_\_\_\_\_

Optional elements for Worship service selected: \_\_\_\_\_

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Additional notes to officiating pastor: \_\_\_\_\_

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