



Wedding Information Form
(For wedding coordinator and office use)

Bride's name: _____
 First Middle Last

Address: _____
 Street City State Zip

Telephone Number: (home)_____ (Cell)_____ (work)_____

Email: _____

Date of Birth: _____ CCC member? Yes No /Parent CCC member? Yes No

Name after marriage: _____
 First Middle Last

Groom's name: _____
 First Middle Last

Address: _____
 Street City State Zip

Telephone Number: (home)_____ (Cell)_____ (work)_____

Email: _____

Date of Birth: _____ CCC member? Yes No /Parent CCC member? Yes No

Address after marriage: _____
 Street City State Zip

Email: _____

Telephone after marriage: _____

This page for office use only:

Wedding Name: _____

Wedding Date: _____ Time: _____

Rehearsal Date: _____ Time: _____

Rehearsal Dinner at CCC? Yes No

Reception at CCC? Yes No

Scheduled on church calendar? Yes No

Pastor Officiating: _____ Confirmed? Yes No

Estimated guest count over 20? Yes No

Sound Technician _____ Notified? Yes No

Wedding Coordinator _____ Notified? Yes No

Deposit paid: cash check# _____ Date paid: _____

Balance paid: cash check# _____ Date paid: _____