

FIRST UNITED METHODIST CHURCH of DES PLAINES
668 Graceland Ave, Des Plaines Illinois, 60016
REQUEST FOR SCHEDULING A WEDDING

Bride: _____

Groom: _____

Mail confirmation of date to (address): _____

Phone: _____

Wedding date requested: _____
Month / date / year

Chapel or Sanctuary: _____

Rehearsal date requested: _____

****Return this form with a check for \$50.00 to reserve the date requested to:**

First United Methodist Church
668 Graceland Avenue
Des Plaines, Illinois 60016