

FAIRFAX COMMUNITY CHURCH WEDDING REQUEST

Please return this form to lynnlundberg@fairfax.cc or mail it to:

Fairfax Community Church
ATTN: Lynn Lundberg
11451 Braddock Road
Fairfax, Virginia 22030

BRIDE'S CONTACT INFORMATION

Name: _____

Date of Birth (DOB): _____

Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Are you a member of Fairfax Community Church? [] Yes [] No

Member at another church (please specify church name, city, state):

GROOM'S CONTACT INFORMATION

Name: _____

Date of Birth (DOB): _____

Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Are you a member of Fairfax Community Church? [] Yes [] No

Member at another church (please specify church name, city, state):



WEDDING DETAILS

Wedding Date (or possible dates): _____

Ceremony Location: _____

Time: _____

Rehearsal Date: _____

Time: _____

Number of Guests: _____

Number in Wedding Party: _____

PASTOR OFFICIATING

[Please mark your preference(s) below.]

☐ Alan MacDonald

☐ Andy Gingrich

☐ Karen Kellogg

☐ Kathleen Otchy

☐ Kyle Cooper

☐ Rod Stafford

☐ Kayla Allen

☐ Jessica Sellers

☐ John Falke

☐ We would also like to have a pastor from another church participate in the ceremony (*specify pastor's name and church affiliation*):

FOR CEREMONIES BEING HELD IN THE CHURCH BUILDING

I would like to reserve a room for the bridal party to dress in. ☐ yes ☐ no

I would like to reserve a room for the groomsmen to dress in. ☐ yes ☐ no

Bridal Party's arrival time: _____

Groomsmen's arrival time: _____

By signing below, I acknowledge that we have read and understand the document entitled "WEDDINGS AT FAIRFAX COMMUNITY CHURCH" on the Fairfax.cc website.

Submitted by: _____ Date: _____

