



Wedding Application

Bride/Groom/Spouse A:

Full Name: _____
 Mailing Address: _____ City/St/Zip: _____
 Email Address: _____
 Preferred Phone: _____ Work Phone: _____
 Mother's Name: _____ Father's Name: _____

Bride/Groom/Spouse B:

Full Name: _____
 Mailing Address: _____ City/St/Zip: _____
 Email Address: _____
 Preferred Phone: _____ Work Phone: _____
 Mother's Name: _____ Father's Name: _____

Date of Wedding: _____ Date of Rehearsal: _____
 Place of Wedding: _____ Place of Rehearsal: _____
 Time of Wedding: _____ Time of Rehearsal: _____
 Place of Reception: _____ Place of Rehearsal Dinner: _____

Are you requesting the services of a pastor from Harmony Creek Church? ☐ Yes ☐ No

If no, please give the name and requested information for the minister you will be using:

Minister's Name: _____
 Church/Organization where minister serves: _____
 Denominational affiliation of the minister: _____
 Mailing Address: _____ City/St/Zip: _____
 Phone: _____ E-Mail: _____

UNDERSTANDING OF AGREEMENT AS TO SERVICES REQUESTED AND ASSOCIATED FEES:

	<u>Covenant Member</u>	<u>Non-Member</u>	<u>Our Fee</u>
Sanctuary Rent:	\$ 0.00	\$500.00	\$ _____
Fellowship Hall Rent:	\$ 0.00	\$400.00	\$ _____
Pastor:	\$ 0.00	\$200.00	\$ _____
Organist:	\$150.00	\$150.00	\$ _____
Pianist:	\$150.00	\$150.00	\$ _____
Soloist:	\$ 75.00	\$ 75.00	\$ _____
Sound Technician:	\$ 75.00	\$ 75.00	\$ _____
Video Technician:	\$ 75.00	\$ 75.00	\$ _____
Custodian:	\$100.00	\$100.00	\$ _____
Wedding Coordinator:	\$200.00	\$200.00	\$ _____
Candelabra/Aisle Candles	\$ 0.00	\$ 50.00	\$ _____
TOTAL FEES:			\$ _____

Non-Refundable Deposit (One Half of the Total Fees Due): \$ _____

**Required to secure dates on the Church's and/or Pastor's Calendar(s).*

Balance of Fees Due Two Weeks before the Wedding Service: \$ _____

We have read and understand the wedding policies of Harmony Creek Church as outlined in the *Two Become One* booklet and are agreeable to all fees as outlined above. In addition, we understand that any damage to the church's building or equipment as a direct result of our wedding service is our responsibility.

X _____ X _____ X _____ X _____ X _____ X _____
 Bride/Groom/Spouse A Date Bride/Groom/Spouse B Date Pastor Date

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