WEDDING SERVICES PACKET



SAINT PAUL AFRICAN METHODIST EPISCOPAL CHURCH 1892 NW 51ST TERRACE MIAMI, FLORIDA 33142 (305) 634-3720 phone (305) 638-5449 fax

<u>info@stpaulamemiami.org</u> email <u>www.stpaulamemiami.org</u> website

Wedding Agreement (Full Formal Wedding or Renewal of Vows)

that all members of	the wedding party will be at the scheduled rehearsal. The , 20 , at 7 PM
sharp. The wedding	, 20, at 7 PM g rehearsal will last only two (2) hours.
FURTHERMORE, V	ve understand and concur that on, 20, the scheduled wedding
set and agreed upo with St. Paul Churc premises without pe	mony does not begin at AM/PM (the time n), unless there is a major emergency, our wedding contract n Ministries is void, and the officiating Minister will leave the efforming the wedding ceremony. The Musicians, Sound ding Service Coordinator are released from their Agreement
	REE that St. Paul Church Ministries is released and held bligations associated with the aforementioned wedding
critical illness, auto 3720 and make arraunderstood and agr	ER AGREE that, in case of a major emergency (i.e., death, accident, etc.), we will call the church office at (305) 634-ingements to notify the Wedding Service Coordinator. It is eed that only 4 hours are allotted for the reception. It is also eed that the Vincent F. Mitchell Fellowship Hall and kitchen
Date	Groom's Signature
Date	Bride's Signature
Date	Officiating Minister's Signature
Date	Wedding Service Coordinator's Signature



Wedding Agreement
Wedding Party
(Full Formal Wedding or Renewal of Vows)

	INFORMED AND HEREBY AGREE	that I am a member of ne
wedding party		
and		
		,
On	20	, the scheduled wedding
day. The wedd	20 ling will begin promptly at	AM/PM (the
time set and ag	reed upon).	
	that I will be present at the wedding ne wedding service time.	location no later than two (2)
Attendant / Flov	wer Girl / Others	
Date	Signature	
Date	Signature	
Date	Signature	
Date	Signature	
	G	
Date	Signature	
Date	Signature	
Groom's Men /	Ring Bearer / Others	
Date	Signature	
Date	Signature	
 Date	Signature	



Data	Cianatura	
Date	Signature	
Date	Signature	
Date	Signature	
Date	Signature	
Bride's Parent(s) / Grandp	parents / Other	
Date	Signature	
	2.9	
D-1-	0:	
Date	Signature	
Date	Signature	
Date	Signature	
Groom's Parent(s) / Grandparents / Other		
Date	Signature	
Date	Signature	
Daic	oignature	
Date	Signature	
Date	Signature	



Wedding Agreement (Office Wedding)

WE HAVE BEEN INFORMED AND HEREBY AGREE that we should arrive thirty (30) minutes before our scheduled wedding time, ready with all necessary items and witnesses for the ceremony.

FURTHERMORE, we unde	erstand and concur that on				
	, 20	_, the scheduled wedding			
day, that if the ceremony does not begin atPM (the time set and agreed upon), unless there is a major emergency, our wedding contract with St. Paul Church Ministries is void, and the officiating Minister and the Wedding Service Coordinator will leave the premises and no wedding will be performed. An honorary fee will be due on the day of the wedding to the staff minister who performs the ceremony.					
WE FURTHER AGREE that St. Paul Church Ministries is released and held harmless from all obligations associated with the aforementioned wedding ceremony.					
critical illness, auto accide	REE that, in case of a major nt, etc.), we will call the chur ents to notify the Wedding S	ch office at (305) 634-			
Date	Groom's Signature				
Date	Bride's Signature				
Date	Officiating Minister's Signat	ure			
Date.	Wedding Service Coordina	tor's Signature			



Wedding Agreement (Offsite Wedding)

WE HAVE BEEN INFORM	MED AND HEREBY AGREE that on, 20, the scheduled wedding
set and agreed upon), un	loes not begin atAM/PM (the time lless there is a major emergency, our wedding contrac tries is void, and the officiating Minister will leave the
secular music, no smoking	ling will be a CHRISTIAN wedding and here will be no of anything or any alcoholic beverages. An honorary ster performing the wedding vows one week prior to the
	at St. Paul Church Ministries is released and held ns associated with the aforementioned wedding
critical illness, auto accide	REE that, in case of a major emergency (i.e., death, nt, etc.), we will call the church office at (305) 634-ents to notify the officiating Minister.
Date	Groom's Signature
Date	Bride's Signature
Date	Officiating Minister's Signature
Date	Wedding Service Coordinator's Signature



WEDDING DATE REQUISITION

Date of Requisition:				
Bride's				
Name				
Address				
City/State/Zip				
Phone: Day Evening				
Membership: Member of SPC? ☐ YES ☐ NO If Yes, Date: Duration yrs/mos				
Church Orientation Class Completed? ☐ YES ☐ NO				
Excellence Ministry Team				
Groom's				
Name				
Address				
City/State/Zip				
Phone: Day Evening				
Membership: Member of SPC? ☐ YES ☐ NO If Yes, Date: Duration yrs/mos				
Church Orientation Class Completed? ☐ YES ☐ NO				
Excellence Ministry Team				
Wedding Date				
Time				
Wedding Type: ☐ SANCTUARY ☐ OFFICE				
Church Reception: ☐ YES ☐ NO				



Wedding Packet mailed on:	Wedding Packet picked up		
on:by 🗆 BRID	DE 🗆 GROOM.		
Officiating Minister	Date Confirmed on		
with			
	<u>_</u> :		
Scheduled Date for Coordinator Meeting:			
Scheduled Date for Pre-Marital Counseling:			
Date Tapes Received:			
Tapes Received by: □BRIDE □GROOM □BOTH			
Requisition Completed by:			
Cancellation: Date Wedding			
Cancelled			
Cancelled by: ☐ BRIDE ☐ GROOM ☐ OT	THER		
Cancelation Received			
by:			
Comment(s)			

