## **APPLICATION FOR CHRISTIAN MARRIAGE**

## FIRST PRESBYTERIAN CHURCH 110 NORTH ADAMS STREET, TALLAHASSEE, FLORIDA 32301-7777

Please <u>complete both sides</u> and return to the church office. When this application is received the church office will reserve your wedding date on the calendar. The date cannot be finalized until the discernment process is completed. (See items A, B, and C in the Wedding Policy.)

NAME OF BRIDE		_ Date of Birth
Address	Phone:(H)	(W)
E-Mail		
Church Membership: Member of this church? YES_	NO	
In what congregation are you currently active?		
Your current pastor's name, address, phone		
Occupation		
Any Previous Marriage? YESNO	_	
Parents' Names		
NAME OF GROOM		Date of Birth
Address	_ Phone: (H)	(W)
E-Mail		
Church Membership: Member of this church? YES	NO	
In what congregation are you currently active?		
Your current pastor's name, address, phone		
Occupation		
Any Previous Marriage? YESNONO	_	
Parents' Names		
DATE OF CONTEMPLATED MARI	RIAGE	
Time		
Address Following Marriage		
*Organist (see item L)		
*DATE OF REHEARSAL (see item L)		Time

Please continue on reverse side.

*Reception at the Church? ( see items N, P) YESNO
Name of Caterer (see item P, Q)
Name of Florist (see items J, O)
Name of Photographer (see items K, O)
*Please see page 7 in the Wedding Policy regarding Fees and Honoraria.
AGREEMENT
I have read and understand the policies regarding weddings held at First Presbyterian Church, Tallahassee, Florida.
I agree that I will abide by these policies and understand that failure to do so may result in the cancellation of my wedding at First Presbyterian Church.
Signature of Bride:
Date:
Signature of Groom:
Date: