

YOUR WEDDING AT TRINITY UNITED METHODIST CHURCH
LAFAYETTE, INDIANA 47901

TODAY'S DATE _____ DATE OF WEDDING _____

ABOUT THE BRIDE:

NAME _____ AGE _____

TELEPHONE (HOME _____ (WORK) _____

CELL # _____ EMAIL _____

ADDRESS _____

CITY, STATE, ZIP _____ COUNTY _____

BIRTHDATE _____ PLACE OF BIRTH _____

RELIGIOUS BACKGROUND _____

OCCUPATION _____

PREVIOUS MARRIAGE? _____ IF YES, DID MARRIAGE END IN DEATH OF SPOUSE? _____

(DATE OF DEATH) _____ DIVORCE? _____ DATE OF DIVORCE _____

FATHER'S NAME _____ PLACE OF BIRTH _____

MOTHER'S NAME _____ PLACE OF BIRTH _____

MOTHER'S MAIDEN NAME _____

ABOUT THE GROOM:

NAME _____ AGE _____

TELEPHONE (HOME) _____ (WORK) _____

CELL # _____ EMAIL _____

ADDRESS _____

CITY, STATE, ZIP _____

BIRTHDATE _____ PLACE OF BIRTH _____

RELIGIOUS BACKGROUND _____

OCCUPATION _____

PREVIOUS MARRIAGE? _____ IF YES, DID MARRIAGE END IN DEATH OF SPOUSE? _____

(DATE OF DEATH) _____ DIVORCE? _____ (DATE OF DIVORCE) _____

FATHER'S NAME _____ PLACE OF BIRTH _____

MOTHER'S NAME _____ PLACE OF BIRTH _____

MOTHER'S MAIDEN NAME _____

ABOUT THE CEREMONY:

WEDDING DATE AND TIME _____

REHEARSAL DATE AND TIME _____

LOCATION OF WEDDING _____

OFFICIATING PASTOR _____

IF MINISTER IS NOT FROM TRINITY UMC, PLEASE SUPPLY CONTACT INFORMATION:

(please provide document showing proof of ordination)

CHURCH & ADDRESS _____

OFFICE # _____ CELL # _____

DATE OF ORDINATION _____

GROOM'S ATTENDANTS:

HONOR ATTENDANT _____

NUMBER OF GROOMSMEN _____

NUMBER OF USHERS _____

BRIDE'S ATTENDANTS:

HONOR ATTENDANT _____

NUMBER OF BRIDESMAIDS _____

FLOWER GIRL _____ RING BEARER _____

BRIDE'S ESCORT _____

ORGANIST _____ SOLOIST _____

OTHER MUSICIANS _____

FLORIST _____ PHOTOGRAPHER _____

VIDEOGRAPHER _____

PICTURES BEFORE AND/OR AFTER CEREMONY? _____

UNITY CANDLE/SAND/SALT _____ CANDELABRA _____ COMMUNION _____

OTHER _____ READER _____

RECEPTION SITE _____

ADDRESS AFTER WEDDING _____

ADDITIONAL CONTACT PERSON _____ PHONE _____

SPECIAL NOTES:

WEDDING FEES:

TRINITY UMC MEMBER _____ NON-MEMBER _____

THE FOLLOWING FEES HAVE BEEN AGREED TO BY THE BRIDE & GROOM. ALL FEES ARE TO BE PAID IN FULL WHEN SCHEDULING YOUR WEDDING AND SHOULD BE MADE PAYABLE TO *TRINITY UNITED METHODIST CHURCH*. PLEASE ATTACH YOUR CHECK TO THIS FORM.

CUSTODIAN 135.00 ____

WEDDING COORDINATOR 295.00 ____

WEDDING DAY ASSISTANT 65.00 ____

COUNSELING 175.00 ____

SOUND TECHNICIAN
(if utilizing live musicians) 65.00 ____

(if utilizing soundtrack) 100.00 ____

CANDELABRA (ONE PAIR, OPTIONAL) 15.00 ____

ORGANIST 225.00 ____

NON MEMBERS ADD:

PASTORS HONORARIUM 175.00 ____

BUILDING USE for wedding 325.00 ____

BUILDING USE for dinners:

REHEARSAL DINNER 200.00 ____

RECEPTION 400.00 ____

TOTAL \$ _____

AMOUNT PAID TODAY \$ _____

BALANCE \$ _____

BALANCE PAID BY (DATE) _____

DATE PAID _____

RECEIVED BY _____

Payments toward all costs associated with your wedding at Trinity United Methodist Church are in exchange for services rendered and cannot be considered a charitable contribution.

I assume responsibility for the protection of the Church building, property and furnishings during the rehearsal and wedding day. Trinity is not responsible for any lost or stolen items. Alcoholic beverages of any kind are not permitted at the church – there are no exceptions. Any wedding party member who has been drinking in excess the day of the wedding will not be permitted to participate in the ceremony.

Light snacks are permitted the day of the wedding for the wedding party. There are fees for using the facilities for the rehearsal dinner and/or wedding reception. These events must be scheduled in advance with our wedding coordinator.

Trinity pastors reserve the right to cancel any wedding if the pre-marriage counseling is not completed to the standards of the church. If this contract is cancelled by the bridal couple, Trinity has the right to pro-rate the refund for administrative fees or as necessary. This refund will be at the discretion of the Trinity Ministers and/or wedding coordinator.

I agree to the terms and condition of this contract.

RESPONSIBLE PARTY _____

If you have any questions or concerns, please contact Robin Young,
Trinity United Methodist Church Wedding Coordinator

Cell: 765-586-5810

Email: weddings@trinitylafayette.org