WEDDING INFORMATION FORM Calvary Lutheran Church ~ Indianapolis

Today's Date		
BRIDE (full name)		
Address	City	Zip
Phone (Home)	(Cell)	
Email		
Birthdate	Age	
Religious Background?		
Current Church?		
GROOM (full name)		
Address		
Phone (Home)		
Email		
Birthdate		
Religious Background?		
Current Church?		
PREFERRED WEDDING DATE:	TIMI heduled at Calvary on Saturo	
LOCATION:	·	•
PREFERRED REHEARSAL DATE:(Rehearsals are usually scheduled at Calvary t		
Est. # of Invited Guests:	Est. # in Bridal Par	ty:
Once your date has been approved, we ask that yo	ou pay a non-refundable	Wedding Registration
Deposit, in order to reserve the date of your wedd	ling (\$50 members / \$10	0 non-member).
For Office Use:	I	
<u>Initial Contacts:</u>	Week of Wedding:	
Date approved w/Pastor & confirmed w/Couple	Contact Custodian	
Added to Wedding Sched. & Facilities Schedule	Include Couple in	•
Fwd Copy of Info. Sheet to Pastors & Hostesses	Honorariums Distr	ibuted
Update Info into ACS	Following Wedding:	
Hostess Assigned:		tin, License, & Info Form
Deposit - Cash or Check: # Date:	_	Vedding, & Env. # Info in ACS
Bulletins/Printing Needed? Y or N #		n Chron. Order Doc
	Update member m	ailbox(es)