

**First United Methodist Church**  
15 East 1st Avenue \* Mesa, AZ 85210  
(480) 969-5577

Copies to: on this date

File	_____
Pastor	_____
Wedding Coord.	_____
Custodian	_____
Organist	_____
Sound	_____
Calendar	_____
Tracker	_____

## **WEDDING REQUEST FORM**

Last name of Bride and Groom: \_\_\_\_\_

Wedding Date: \_\_\_\_\_ Wedding Time: \_\_\_\_\_

Rehearsal Date: \_\_\_\_\_ Rehearsal Time: \_\_\_\_\_

Pastor officiating wedding: \_\_\_\_\_

### **Bride's Information:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work # \_\_\_\_\_

Best time & number to contact: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

### **Groom's Information:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work # \_\_\_\_\_

Best time & number to contact: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Wedding Cost: \$\_\_\_\_\_ Balance is due one month before wedding date. Please make check to First United Methodist Church. **Please be reminded that the deposit is nonrefundable.**

### **For Office Use Only**

Deposit Received: \_\_\_\_\_ Date Confirmed: \_\_\_\_\_ Check No. \_\_\_\_\_ Cash \_\_\_\_\_

Balance Owed: \_\_\_\_\_ Date Received: \_\_\_\_\_ Check No. \_\_\_\_\_ Cash \_\_\_\_\_

FUMC Member: Yes No Non-member facility cost: \$500 FUMC Pastor: \$200 Organist/Pianist \$150

Wedding Hostess - Sanctuary / Chapel \$150

Custodial - Sanctuary/Chapel \$50 Sound technician - \$35

## WEDDING CEREMONY INFORMATION

### Pastor Information

Pastor: \_\_\_\_\_ Place: Sanctuary \_\_\_\_\_ Chapel \_\_\_\_\_ Courtyard \_\_\_\_\_

Rehearsal Date: \_\_\_\_\_ Rehearsal Time: \_\_\_\_\_

Wedding Date: \_\_\_\_\_ Wedding Time: \_\_\_\_\_

Who will present the bride? \_\_\_\_\_

Unity Candle: Yes \_\_\_\_\_ No \_\_\_\_\_ Number of rings: \_\_\_\_\_

Has the couple arranged six (6) sessions of counseling? \_\_\_\_\_

### Wedding Coordinator Information

Groom: \_\_\_\_\_ Bride: \_\_\_\_\_

Best Man: \_\_\_\_\_ Maid of Honor: \_\_\_\_\_

Groomsmen: \_\_\_\_\_ Bridesmaids: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Ring Bearer: \_\_\_\_\_ Flower Girl: \_\_\_\_\_

Groom's Mother: \_\_\_\_\_ Bride's Mother: \_\_\_\_\_

Groom's Father \_\_\_\_\_ Bride's Father: \_\_\_\_\_

Ushers, if not groomsmen: \_\_\_\_\_

Wedding book attendant: \_\_\_\_\_

Wedding is (formal), (semi-formal), (informal).

Bride's colors: \_\_\_\_\_

Florist: \_\_\_\_\_ Phone: \_\_\_\_\_

Photographer: \_\_\_\_\_ Phone: \_\_\_\_\_

If applicable: Name of person doing video taping: \_\_\_\_\_

Phone: \_\_\_\_\_

Reception here \_\_\_\_\_ away \_\_\_\_\_

See the facility use form for receptions on campus. Receptions on campus require a separate facility hostess and custodian. All facility room reservations need to be cleared and approved by the church secretary.

**Please note: The Fellowship Hall is only available on Saturdays until 4:00 PM for receptions.**