



NEW ERA CHURCH WEDDING APPLICATION

Wedding Date: _____ Wedding Time: _____ Time In: _____
Time Out: _____

Rehearsal Date: _____ Rehearsal Time: _____ Time In: _____
Time Out: _____

Will you use the church for the Rehearsal Dinner? YES NO

Time In: _____ Time Out: _____

Will you use the church for the Wedding Reception? YES NO

Will you need the Audio/Visual Team? YES NO

Will you need a Musician(s)? YES NO

Will you need to decorate the building in advance? YES NO

When? _____

Do you have a Wedding Coordinator? YES NO

Name & Phone _____

Name of Bride

Address

City/State/Zip

Home Phone _____ Work Phone _____

Cell Phone _____

Email Address _____

Emergency Contact _____

Phone _____

Have you ever been married before? YES NO

If yes, date of divorce _____

Are you a member of NEC? YES NO

Name of Groom

Address

City/State/Zip

Home Phone _____ Work Phone _____

Cell Phone _____

Email Address _____

Emergency Contact _____

Phone _____

Have you ever been married before? YES NO

If yes, date of divorce _____

Are you a member of NEC? YES NO

We understand this is a building designated for Christian usage, and we pledge to abide by the rules of the church.

Signature(s):

(Bride) _____ (Date) _____

(Groom) _____ (Date) _____

FOR OFFICE USE:

Deposit/Date: _____ Check/Money Order Cash

Balance/Date: _____ Check/Money Order Cash

Final Balance/Date: _____ Check/Money Order Cash

Rooms Needed: Sanctuary Fellowship Hall Sanctuary II (Room _____)

Other _____

Before You Say I Do Course Completed? YES NO or Special Counseling Completed?
 YES NO

Final counseling appointment with Clergy? YES NO

Date/Time: _____

Certificate of Marriage License? YES NO

Minister Officiating Wedding:

Custodian: _____ Audio/Visual:

Other: _____

Wedding Coordinator:

Damage Report or Comments:
