

Wedding Reservation Request

Weddings are not confirmed until this form is completed and necessary approvals are obtained. Applications are reviewed weekly at our Tuesday staff meetings and filled on a first-come, first-served basis. After we have confirmed that your wedding date and time are available, the church office will contact you to confirm that your wedding has been scheduled.

Today's Date _____

Wedding: Week Day & Date _____ Time: _____

Rehearsal: Week Day & Date _____ Time: _____

Ceremony Location: ____ Sanctuary (*holds approximately 350*) ____ Chapel (*holds approximately 75*)

Bride's Name _____

Address _____

Home/Cell Phone # _____ Work # _____

E-Mail Address _____

Groom's Name _____

Address _____

Home/Cell Phone # _____ Work # _____

E-Mail Address _____

Contact Person —*if other than bride or groom* _____

Address _____

Home/Cell Phone # _____ Work # _____

E-Mail Address _____

Who is officiating your ceremony? ____ Baker Memorial UMC Pastor ____ Your Pastor

If *your* pastor is officiating your ceremony, **Pastor Name** _____

Church Affiliation _____ Church Phone # _____

Mailing Address _____

PLEASE NOTE: Baker Memorial UMC is not responsible for any items left in our building after the ceremony.

In order to fully staff your BMUMC wedding, please answer the following questions.

Do you envision utilizing organ music as part of your ceremony? ____ yes ____ no

Do you anticipate having Baker Memorial help you find other musicians beyond organ? ____ yes ____ no

If yes, what category? ____ pianist, ____ female vocalist, ____ male vocalist, other _____

Do you anticipate decorating with candles for your ceremony? ____ yes ____ no

BAKER MEMORIAL UNITED METHODIST CHURCH

307 Cedar Ave., St. Charles, IL 60174 | office: 630.584.6680, ext. 105 | fax: 630.584.6712 | weddings@bakermemorialchurch.org