

WEDDING CEREMONY FINAL INFORMATION FORM

Please submit this form no later than three (3) weeks prior to the wedding date.

**Rental includes staff member on site and access for
two hours for rehearsal and five hours for ceremony.**

**Please indicate times below for the rehearsal and ceremony and times the chapel
is to be opened and closed.***

THE WEDDING OF _____ and _____
Bride/Groom Bride/Groom

CEREMONY: Date _____ Time Of Ceremony _____ *5 hours: Open _____ Close _____

REHEARSAL: Date _____ Rehearsal Start Time _____ *2 hours: Open _____ Close _____

Contact Name: _____ Cell Phone: _____

Street City State Zip Code

Approximate No. of Guests Expected Total # of Wedding Party (excluding bride/groom) No. of Flower Girls No. of Ring Bearers No. of Additional Ushers

Musician(s) Email Address Telephone

Vocalist(s) Email Address Telephone

Photographer Email Address Telephone

Videographer Email Address Telephone

Florist Email Address Telephone

Flowers on Altar _____ Bows on Pews _____ Aisle Runner _____ Other (please specify) _____

Additional Music/Audio Needs (please be specific & indicate if using a type pre-recorded music)

Signature of Bride/Groom Signature of Bride/Groom

Officiant Name Assisting Officiant Name

Parish/Congregation Officiant Telephone Number