

Wake Forest Presbyterian Church
Information Form for Weddings

BRIDE'S FULL NAME & ADDRESS:

GROOM'S FULL NAME & ADDRESS

EMAIL: _____
PHONE: (Home) _____
(Business) _____
(Cell) _____

EMAIL: _____
PHONE: (Home) _____
(Business) _____
(Cell) _____

DATE OF BIRTH: _____

DATE OF BIRTH: _____

CHURCH AFFILIATION: _____

CHURCH AFFILIATION: _____

Parent's name & phone #: _____

Parent's name & phone #: _____

What will your address be after the wedding? _____

WEDDING DATE: _____ TIME: _____ MINISTER(S): _____

REHEARSAL DATE: _____ TIME: _____ ACCOMPANIST: _____

SOLOIST OR SPECIAL MUSICIAN: _____ LITURIST: _____

AUDIO _____ CHILD CARE ROOM: _____ SUGGEST: YOU PROVIDE FOR CHILDREN UNDER 3

NUMBER OF ATTENDANTS: (Female) _____ (Male) _____ (Children) _____

FLORIST: _____ PHONE: _____ Will flowers be left for Church to use? _____

DOUBLE OR SINGLE RING? _____ NUMBER OF GUESTS EXPECTED: _____

PHOTOGRAPHER: _____ PHONE: _____ VIDEOGRAPHER: _____ PHONE: _____