

# WEDDING APPLICATION FORM

Desired Location of Wedding:  Sanctuary OR  Chapel

Wedding Date (give 3 choices)

- Date choice #1 \_\_\_\_\_
- Date choice #2 \_\_\_\_\_
- Date choice #3 \_\_\_\_\_

Time of Wedding: \_\_\_\_\_ Rehearsal Time: \_\_\_\_\_

Officiating Minister:  MSUMC Minister  Guest Minister Minister Name: \_\_\_\_\_

If a Guest Minister, provide contact information: \_\_\_\_\_

If the bride or groom (or a parent/grandparent) is an active member of Mulberry Street United Methodist Church, please list their name(s): \_\_\_\_\_

## Bride's Contact Information

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_ Work phone: \_\_\_\_\_

## Groom's Contact Information

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_ Work phone: \_\_\_\_\_

## ACKNOWLEDGEMENT AND AGREEMENT

With our signatures below, we affirm that we have thoroughly reviewed the Guidelines for Weddings and agree to all guidelines and stipulations and to pay all fees. Further, we agree to notify the photographer(s), videographer(s), florist(s), and all other contracted professionals, as well as members of the wedding party, of any guidelines or stipulations that may pertain to them. And we agree to pay all required facility and wedding service fees.

\_\_\_\_\_  
Bride's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Groom's signature

\_\_\_\_\_  
Date

***In addition to this document, please submit the "Hold Harmless Form" provided on the website.***

### Mulberry Street United Methodist Church

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Mrs. Beth Smith (Mulberry Wedding Director) · bethns7972@gmail.com · (478) 719-9041 (cell)