

Wedding Registration Form (Please return with your non-refundable deposit.)

Linworth United Methodist Church

7070 Bent Tree Boulevard
Columbus OH 43235

Telephone 614.336.8485

Fax 614.336.8486

Wedding Date _____ Time _____

Rehearsal Date _____ Time _____

	Bride	Groom
Name		
Address		
Phone	Home: Work: Other: E-mail:	Home: Work: Other: E-mail:
Age		

Number in Bride's Party _____ Number in Groom's Party _____

Number of Guests _____ Will you be using the church organist? Yes _____ No _____

Sound System required for weddings over 50 guests.

Will you have: ___Vocalist(s)? ___Instruments (i.e. guitar)? ___Readers? ___CDs to play?

Reception at Linworth UMC: Yes _____ No _____ Who will cater your reception? _____

Who will your florist be? Name _____ Phone _____

Who will be your photographer? Name _____ Phone _____

Office Use Only - Services:

Responsible Person:

Candelabrum:	<u>Altar Guild</u>
Plant Stands:	<u>Altar Guild</u>
Banner:	<u>Ed Fagan</u>
Screens:	<u>Ed Fagan</u>
Organist:	<u>Tom Cook</u>
Soloist:	_____
Sound System:	_____

Fees:

Total Fees: _____ Remaining Amount Due: _____
Deposit Total: _____ All Fees Paid Date: _____

To be completed by the Senior Pastor

Wedding Scheduled " Yes " No

Officiating Pastor _____ Wedding Assistant _____

Assisting Pastor (___ Yes ___ No): Name _____ Phone _____