

WEDDING ARRANGEMENTS FORM

FIRST BAPTIST CHURCH · 239 MIDDLE STREET · P. O. BOX 1463 · NEW BERN, NC 28563 · (252) 638-5691

(To be returned to the church office prior to premarital counseling sessions)

BRIDE				GROOM			
Name				Name			
Address				Address			
City		State		City		State	
Phone	()			Phone	()		
Email				Email			
Circle One	Never Married	Divorced	Widowed	Circle One	Never Married	Divorced	Widowed

REHEARSAL		WEDDING PLACE (circle one)		
Date				Sanctuary Garden Other_____
Time				Second Minister? YES NO
WEDDING		Minister's Name		
Date				Reception at FBC? YES NO
Time				Time Place

NEW Address after Marriage				Wedding Coordinator	
Address 1				Florist	Phone
Address 2				Special remarks or requests: _____ _____ _____	
City					
State		Zip Code			

We have read and agree to the stipulations of the wedding manual policy.

Bride's Signature:	Date:
Groom's Signature:	Date:
Officiant's Agreement:	Date:

OFFICE USE ONLY				
DATE	CHECK CASH	NAME ADDRESS	AMOUNT	BALANCE