



Wedding Application
Athens First United Methodist Church
327 N. Lumpkin Street, Athens, Georgia 30601

Wedding Date & Time _____ Rehearsal Date & Time _____

(circle) Sanctuary Chapel

Bride _____ Phone _____

(Member of Athens First United Methodist Church? Yes no

E-Mail address _____

Address _____

Parent's Names _____ Phone _____

(Member of Athens First United Methodist Church? Yes no

Address _____

Groom _____ Phone _____

(Member of Athens First United Methodist Church? yes no

Address _____

Parent's Names _____

(Member of Athens First United Methodist Church? yes no

Address _____ Phone _____

If Grandchild of member, Name(s) of Grandparent(s) _____

**Mailing address after
wedding** _____

MINISTER (S) _____

ORGANIST _____ DIRECTOR _____

Photographer (name, address, phone, & email) _____

Church Videographer _____ Other Videographer _____ Name & Email address _____

Florist (name, address, phone, & email) _____

I have read and understand the *Wedding Guidelines* and agree to abide by the standards therein. I understand upon receipt of the application and deposit, the date will be held for seven days to allow me to secure a Minister, Director, Organist, Photographer, and Florist. If this information is not provided with this time period, the date will be released and the deposit will be refunded.

Please return a deposit of \$100.00 with your application to secure your wedding date.

Total Fees Due \$ _____ on _____, 2009 (four weeks prior to wedding)

SIGNATURE _____ Date _____