

WEDDING RESERVATION FORM

First Baptist Church of Sherwood
701 Country Club Road
Sherwood, Arkansas 72120
501-835-3154
501-835-3348 (Fax)

This form is to be turned in to the Pastor's secretary, accompanied by any applicable fees in order to have a date confirmed on the Church Calendar. Money will be returned if wedding is cancelled.

If you wish to have your wedding published in the First Edition and bulletin, please submit a copy of the invitation to the church office no later than one month before the date of the wedding.

Date of Wedding: _____	Time of Wedding: _____
------------------------	------------------------

BRIDE'S NAME: _____

Address: _____

Telephone: Home _____ Work _____

Church Home: _____ Age: _____

GROOM'S NAME: _____

Address: _____

Telephone: Home _____ Work _____

Church Home: _____ Age: _____

Date & Time of Rehearsal: _____ Rehearsal Dinner Location: _____

Reception Location: _____ Caterer (or hostess) _____

Minister: _____ Assisting Minister: _____

Florist: _____ Photographer: _____

Organist: _____ Vocalist(s) _____

Wedding Director: _____ Phone: _____

Number of Attendants

Bridesmaids _____ Flower Girl _____

Groomsmen _____ Ring Bearer _____

Do you plan to leave flowers for the Sunday Worship Service? Yes___ No___

Do you plan to use sound equipment in your wedding? Yes___ No___

Address after the wedding: _____

Keys checked out by: _____ Date: _____

Keys to be returned by: _____ Date: _____

I have read and understand the wedding policies. _____

(signature)