



RICHLAND SEVENTH-DAY ADVENTIST CHURCH

WEDDING APPLICATION

To be completed and returned with fees at least 60 days (preferably three months) prior to date of wedding to: Richland Seventh-day Adventist Church, 1807 McMurray Avenue, Richland, WA 99352. Phone: 509-946-8807.

Any arrangements for use of the church must be considered tentative only until a completed copy of this application is returned to the contact person with the approval indicated.

Name of Contact Person _____ Phone _____
Address _____

Name of Bride _____ Phone _____
Address _____

Church member of _____
Name of Groom _____ Phone _____
Address _____

Church member of _____
Bride's Parents _____ Phone _____
Address _____

Groom's Parents _____ Phone _____
Address _____

Officiating Minister _____ Phone _____
His church affiliation _____

Organist _____ Phone _____

Photographer _____ **Florist** _____

Wedding Coordinator _____ Phone _____

Reception Coordinator _____ Phone _____

Church Event Coordinator Barb Laubach Phone 509-727-0934

Church Kitchen Coordinator _____ Phone _____

Have you made arrangements for premarital counseling? _____
If no, would you like assistance in making arrangements for counseling? Yes No

Date of Wedding _____ **Time** _____ a.m. _____ p.m.

Date of Rehearsal _____ **Time** _____ a.m. _____ p.m.

Facilities desired: () Sanctuary () Dressing Rooms, how many? _____ () Fellowship Hall () Kitchen

Approximate Number of Guests _____

Do you need use of the church PA system? _____ (\$50-\$100 FEE depending on needs & time)

Music submitted for approval:
Processional _____
Recessional _____
Special Music _____

Name of Performer _____ Instrument or Voice (circle one)

Accompanied by organ, piano, other (specify) _____

Enclosed fee \$ _____

I have read the church Wedding Guidelines and agree to abide by them.
SIGNED BY _____ **Date** _____

APPROVED BY _____ **Date** _____

