



Thank you for considering Calvary Lutheran Church for your wedding day. Please fill out the information below and return with your non-refundable \$150 deposit fee in order to reserve the date you are requesting.

Our request for a wedding date is \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Bride

\_\_\_\_\_  
Printed Name of Groom

Contact information for the Bride:

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact information for the Groom:

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

We have read and agree to the policies outlined in the Calvary Lutheran Church Wedding Brochure.

\_\_\_\_\_  
Bride Signature

\_\_\_\_\_  
Groom Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Signed

OFFICE USE ONLY:

\_\_\_\_ Dep. \_\_\_\_ Date \_\_\_\_ Pastor Contacted \_\_\_\_ On CLC Calendar \_\_\_\_  
\_\_\_\_ Added to Wedding Worksheet