

**Application for Wedding Service**

**Danville Congregational Church**

*United Church of Christ*

989 San Ramon Valley Blvd.

Danville, CA 94526

Phone (925) 837-6944

FAX (925) 837-2489

Wedding Date \_\_\_\_\_ Wedding Time \_\_\_\_\_ 3-hour time block: \_\_\_\_\_

Rehearsal Date \_\_\_\_\_ Rehearsal Time \_\_\_\_\_

# of Attendants \_\_\_\_\_ Est. number of Guests \_\_\_\_\_

**Bride**

**Groom**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/St/Zip \_\_\_\_\_

Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_

**Preferred contact person: Bride \_\_\_\_\_ Groom \_\_\_\_\_ Other (see below) \_\_\_\_\_**

Other \_\_\_\_\_  
(Name) (Relationship)

Address \_\_\_\_\_

Phone \_\_\_\_\_  
Home Cell Work

*I have read the informational guide accompanying this application and agree to abide by the rules and traditions of the Danville Congregational Church, as they apply to weddings. I agree that the church staff shall have final authority in all matters relating to the wedding service.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE**

Fee \_\_\_\_\_ Dep paid \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_

Bal. due \_\_\_\_\_ Bal paid \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_  
*(one month prior to wedding date)*

Minister \_\_\_\_\_ Phone \_\_\_\_\_

Wedding Coordinator \_\_\_\_\_ Phone \_\_\_\_\_

Lead Wedding Hostess \_\_\_\_\_ Phone \_\_\_\_\_

Wedding Hostess \_\_\_\_\_ Phone \_\_\_\_\_

Organist \_\_\_\_\_ Phone \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_