



FIRST UNITED METHODIST CHURCH
217 SOUTH CHURCH STREET
SALISBURY, NORTH CAROLINA 28144
(704) 636-3121 | WWW.FUMSCALISBURY.ORG

WEDDING RESERVATION AND INFORMATION FORM

To be completed and returned with required fees to the church office to reserve your wedding date.

Date of Ceremony: _____ Venue: __Sanctuary__ Chapel
Ceremony Time: _____ Time of wedding rehearsal: 4pm 5pm 6pm (circle one)
Are flowers to be left for Sunday worship? yes ___ no ___

Bride's Name: _____ Member ___ Non-Member ___
Address: _____

Home phone: _____ Work Phone: _____ Mobile: _____
Email Address: _____

Groom's Name: _____ Member ___ Non-Member ___
Address: _____

Home phone: _____ Work Phone: _____ Mobile: _____
Email Address: _____

Consultant(s) _____ Phone: _____
Name of Florist: _____ Phone: _____
Name of Photographer: _____ Phone: _____
Name of Videographer: _____ Phone: _____

Will the kneeling bench be used during the ceremony?: Yes: ___ No: ___
Should space be reserved on Church Street for wedding party transportation to the reception?
Yes: ___ No: ___

We agree to abide by the stated policies and guidelines of First United Methodist Church of Salisbury:

Bride's Signature and Date

Groom's Signature and Date