

# Port Charlotte UMC Wedding Request Form

Upon completion of this request form, please save a copy of the PDF and email it to: churchadmin@pcumc.info or PRINT and fax to the church: 941-625-0144. *Thank you!*

Application Date:		Date Received (Church Office Use Only)	
Planned Wedding Date:		Time:	
Place of Wedding:		Place of Reception:	
Rehearsal Date:		Time:	
Officiant's Name:	Officiant Phone:	Officiant Email:	
Officiant's Church/Denomination:			
Person helping with wedding arrangements (mother, friend, wedding consultant):			
Name:		Phone:	
Number of Attendants:		Number of Guests:	

## **Bride:**

BRIDE Full Name:		
Date of Birth:	Nickname:	
Address (City/State/Zip):		
Name to be used in ceremony:		
Home Phone:	Work Phone:	Cell Phone:
Email Address:	Employed by:	

Single:	Widowed:	Divorced:
Church Affiliation:		
Father of the Bride Name:	Mother of the Bride Name:	
Father Attending Ceremony? (yes or no)	Mother Attending Ceremony? (yes or no)	
Married to each other? (yes or no)	If no, have they remarried?	
Name of Spouse(s):	Attending Ceremony? (yes or no)	

## **Groom:**

GROOM Full Name:		
Date of Birth:	Nickname:	
Address (City/State/Zip):		
Name to be used in ceremony:		
Home Phone:	Work Phone:	Cell Phone:
Email Address:	Employed by:	
Single:	Widowed:	Divorced:
Church Affiliation:		
Father of the Groom Name:	Mother of the Groom Name:	
Father Attending Ceremony? (yes or no)	Mother Attending Ceremony? (yes or no)	

Married to each other? (yes or no)	If no, have they remarried?
Name of Spouse(s)	Attending Ceremony? (yes or no)

**To be seated prior to the service:**

Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:

**WEDDING PARTY:**

Maid/Matron of Honor:	Best Man:
Bridesmaid(s):	Groomsmen:

Flower Girl:	Usher:
Who will present the bride?	Usher:
Acolyte(s)?	Ring Bearer:
Unity Candle? (yes or no)	
Soloist(s):	Phone:
Other Musicians:	Phone:
Florist:	Phone:
Photographer:	Phone:
Videographer:	Phone:
Wedding Coordinator:	Phone: