

Reservation Form for Use of Sanctuary

Date of Event: _____

Time of Event: _____

Contact or

Bride's Name: _____ Date of Rehearsal: _____

Address: _____ Time of Rehearsal: _____

Phone: (H) _____ (O) _____ (C) _____ Email: _____

Member of First Baptist? ____ Yes ____ No

Groom's Name: _____

Address: _____

Phone: (H) _____ (O) _____ (C) _____ Email: _____

Member of First Baptist? ____ Yes ____ No

Address After Marriage: _____

Officiating Minister _____ Phone: _____

Address: _____ Counseling Completed? ____ Initials ____

Wedding Director: _____ Phone: _____

Organist: _____ Phone: _____

Pianist: _____ Phone: _____

Other Musicians: _____ Instrument: _____ Phone: _____

Vocalist: _____ Phone: _____

Florist: _____ Phone: _____

Flowers to be left for Worship Service? ____ Yes ____ No

Photographer: _____ Phone: _____

Videographer: _____ Phone: _____

Reception Site: _____

I hereby state that I have reviewed this policy and that I understand that by my signature below, I am responsible for the wedding party and vendors to follow First Baptist Church's guidelines as stated in the Wedding Policy. I understand that any cost of damage to church property will be deducted from my security deposit and that I am personally responsible financially for any additional damages.

Signature _____ Date: _____

FEES: All fees due in full two weeks prior to wedding date. Payable party is indicated with each fee.

Required Fees for All: Wedding Hostess Fee: \$150 (*Hostess*) Date Received/Initials _____

Custodian's Fee: \$100 (*Custodian*) Date Received/Initials _____

Damage Deposit: \$200 (*Church*) Date Received/Initials _____

Required for Non-Members: Non-Member Sanctuary Rental \$300 (*Church*) Date Received/Initials _____

Optional Services: Sound Booth Operator: \$75 (*Sound Tech*) Date Received/Initials _____

Candelabra Rental: \$75 (*Church*) Date Received/Initials _____

Organist: \$150 (*Organist*) Date Received/Initials _____

Minister - \$150 for Non-Members (*Minister*) Date Received/Initials _____

Wedding Hostess Assigned: _____

Fellowship Hall/Kitchen Reservation Form

Date of Event: _____
Time of Event: _____
Type of Event: _____
Date of Rehearsal: _____
Time of Rehearsal: _____

Contact Information:

Name: _____
Address: _____
Phone: (H) _____ (O) _____ (C) _____
Member of First Baptist? ____ Yes ____ No

If Wedding:

Bride's Name: _____ Phone: _____
Groom's Name: _____ Phone: _____

Wedding Director: _____ Phone: _____

Caterer: _____ Phone: _____
Address: _____

Florist: _____ Phone: _____

Photographer: _____ Phone: _____

Videographer: _____ Phone: _____

Entertainment: _____ Phone: _____

I hereby state that I have reviewed this policy and that I understand that by my signature below, I am responsible for the wedding party and vendors to follow First Baptist Church's guidelines as stated in the Wedding Policy and Kitchen Policy. I understand that any cost of damage to church property will be deducted from my security deposit and that I am personally responsible financially for any additional damages.

Signature _____ Date: _____

FEES: All fees due in full two weeks prior to wedding date. Payable party is indicated with each fee.

Required Fees for All:

Reception Hostess Fee: \$100 (<i>Hostess</i>)	Date Received/Initials _____
Set Up/Break Down Fee: \$100 (<i>Hostess</i>)	Date Received/Initials _____
Custodian's Fee: \$100 (<i>Custodians</i>)	Date Received/Initials _____
Tablecloths: \$8.00 per cloth cleaning fee (<i>Individual</i>)	Date Received/Initials _____
Damage Deposit: \$200 (<i>Church</i>)	Date Received/Initials _____

Fees Required for Non-Members:

Non-Member Room Rental: \$300 (*Church*) Date Received/Initials _____

Reception Hostess Assigned: _____

Pre-Marital Counseling



Pre-marital counselors:

All persons married at First Baptist Church are required to undergo pre-marital counseling/coaching. One of our pastors must receive this pre-marital counseling form or a letter from you on your official stationary stating that the counseling has been completed at least six (6) weeks before the wedding. If you have questions for one of our pastors, we can be reached at 864-646-3913.

_____ have completed pre-marital counseling with me. In my professional opinion, they are adequately prepared for marriage and should proceed with their wedding as scheduled.

Clergy Person/Counselor _____

Title _____

Signature _____ Date _____

Please return to either Courtney Krueger or Jennifer McClung at:

First Baptist Church
P.O. Box 187
Pendleton, SC 29670