

Wedding Record
Creston Christian Church (Disciples of Christ)
P.O. Box 69 Creston, WA 99117
(509) 636-2761

IMPORTANT--READ FIRST:

No approval for wedding arrangements can be given (including reservation of date, sanctuary, and pastor's participation, etc.) until A) the couple has scheduled, and followed through with, at least one meeting to talk with the pastor, B) the couple has been present during at least one Sunday morning worship service in which the pastor preached, and C) the original copy of this Wedding Record Form is completed and delivered to the pastor. These prerequisites are the responsibility of the couple being married to make arrangements for and carry out. These prerequisites need to be completed at least 30 days prior to desired wedding date, but are no automatic guarantee that the Pastor will agree to perform ceremony.

Couple's Information

NAME OF GROOM: _____ **PHONE #:** _____

ADDRESS: _____

AGE: _____

OCCUPATION: _____

NAME OF BRIDE: _____ **PHONE #:** _____

ADDRESS: _____

AGE: _____

OCCUPATION: _____

RESIDENCE AFTER

MARRIAGE: _____

HOW LONG ENGAGED: _____ **HOW LONG**

ACQUAINTED: _____

ANY PREVIOUS MARRIAGES: YES / NO

(if YES, give reason for termination such as divorce, death, annulment. Give date, place of termination.)

DOES EITHER PERSON HAVE ANY CHILDREN ALREADY: YES / NO

(if YES, whose are they and how many children are involved? Include names, ages, and sex of children.)

PARENT'S NAMES AND ADDRESS:

BRIDE'S: _____

GROOM'S: _____

CHURCH MEMBERSHIP:

IS THE GROOM, BRIDE, OR AT LEAST ONE PARENT OF EITHER
AN "ACTIVE MEMBER" OF THE CHRISTIAN CHURCH (DISCIPLES OF
CHRIST):

YES / NO ; WHO-

(see definition of "active Membership" in Wedding Guidelines)

PRESENT STATUS OF CHURCH MEMBERSHIP

BRIDE: YES / NO ; WHERE-

GROOM: YES / NO ; WHERE-

BRIDE'S PARENTS: YES / NO ; WHERE-

GROOM'S PARENTS: YES / NO ; WHERE-

Ceremony Information

REQUESTED WEDDING DATE: _____ TIME OF WEDDING: _____

ALTERNATE WEDDING DATE: _____

TIME OF ALTERNATE WEDDING: _____

DATE FOR REHEARSAL: _____

TIME FOR REHEARSAL: _____

REHEARSAL DINNER: YES / NO

Location: _____

Is the pastor requested to be present for this Rehearsal Dinner: YES / NO

RECEPTION: YES / NO

Location: _____

Person in Charge of Reception: _____

Reception Attendance: _____

Time of Reception: _____

ESTIMATED OF # OF GUESTS : Wedding _____ Reception _____

NAME OF WEDDING COORDINATOR: _____

NAME OF MINISTER(S) OFFICIATING AT WEDDING:

1) _____ 2) _____

NAME OF ORGANIST:

1) _____

NAME OF SOLOIST: _____ PHONE #: _____

MUSICAL SELECTIONS:

Prelude- _____

Prelude- _____

Prelude- _____

Wedding Party's Processional- _____

Bride's Processional- _____

Other- _____

Other- _____

Recessional- _____

Postlude- _____

Ceremony Information continued...

RINGS: Double _____ Single _____

BRIDE'S ATTENDANTS:

Maid/Matron of Honor:

Bridesmaids:

Candlelighter(s):

Ushers:

GROOM'S ATTENDANTS:

Best Man:

Groomsmen:

Ring Bearer: _____

Flower Girl: _____

Couple to light Wedding Candle: YES / NO

Flowers for mothers: YES / NO

Bride to have Bouquet: YES / NO

Ceremony Information continued...

Special seating arrangements for families:

Does the couple wish to partake of The Lord's Supper: YES / NO

*If the Holy Communion is a desired part of the service, both bride and groom must be confessing Christians and members of a church congregation. When celebrated, the Lord's Supper must be offered to everyone in attendance at wedding.

Any Special
information:

FUTURE SCHEDULED APPOINTMENTS WITH MINISTER –

TIME: _____

DATE: _____

TIME: _____

DATE: _____

TIME: _____

DATE: _____

TIME: _____

DATE: _____