Shawnee United Methodist Church

Wedding Reservation Request Form

		E -mail Address		
Address				
City, State, Zip				
Home phone		Work phone		Cell phone
Name of Groom		E-mail Address		s
Address				
City, State, Zip				
Home phone		Work phone		Cell phone
Requested date of Wedding (mm/dd/yy		/y)	Requested date of Rehearsal (mm/dd/yyyy)	
1st choice	Time		1st choice	Time
2nd choice	Time		2nd choice	Time
3rd choice	Time		3rd choice	Time
Reception at Church 🗌 YES		🗌 NO	Number of expected guests (estimated)	
Minister Requested (if other	than Church Past	tor)		
Address		City, State, Zip		Ph. no.
Location of the Wedding				
		SCHEDU	ILE OF FEES	
		MEMBERS		NON-MEMBERS
Chapel Only Sanctuary Only Wedding		NO CHARGE NO CHARGE		\$200.00 \$350.00
Wedding w/Reception in Fellowship Hall		\$125.00		\$500.00
Reception Only		\$ 50.00		\$150.00
Standing Candelabra		NO CHARGE		\$ 50.00
Unity Candle Holder (Our set must be used)		\$ 25.00		\$ 25.00
Wedding Coordinator		\$175.00		\$250.00
Custodial Fee Organist Fee		\$150.00 \$175.00		\$200.00 \$250.00
Clergy Fee		\$200.00		\$300.00
Sound Engineer		\$ 50.00/Rehearsal & Wedding		\$100.00/Rehearsal & Wedding
placed on the church calen	dar <u>only after</u>	this form has b	peen completed and	ning it. Your Wedding date will be deposit have been received. ALL FEE edule for more information.
	-			o care for special needs and services gineer fees are required for all

We have read the Wedding Policy and agree to abide by the procedures and rules stated therein.