

Please complete, sign, and return this form to the church office. Once received, one of our pastors will be in touch to confirm details in order to submit to the Session for approval.

Wedding Information Sheet

Wedding Date _____ **Time** _____ **Time to Open Church** _____
(Up to 2 hours before wedding)

Rehearsal Date _____ Time _____

Bride _____ Cell Phone _____ Work Phone _____

Mailing address _____

E-mail _____

Parents' Names _____ Contact Info: _____

Grandparents' Processing: Y or N Names _____

Groom _____ Cell Phone _____ Work Phone _____

Mailing address _____

E-mail _____

Parents' Names _____ Contact Info: _____

Grandparents' Processing: Y or N Names _____

Location: Chapel Sanctuary Rose Garden **Reception** in Church Fellowship Hall? Y or N

Total Number of guests expected _____ (Chapel- Max 50, Sanctuary- Max 375, Rose Garden- Open)

Officiating Pastor: Rev. Peter A. Thompson (Senior Pastor)

All Wedding Celebrations at FPCLY must include at least one pastor from First Presbyterian Church. If you have a request for an additional pastor to assist, please provide name, church affiliation, and contact information below.

Assisting Pastor: _____ Church/Contact: _____

Organist: Cory Whittier

All Wedding Celebrations at FPCLY must involve the current Organist/Choir Director. If you have a request for any special music or guest musicians, please provide name and contact information below.

Special Music: _____

Guest Musicians: _____

Readers: _____

Photographer: _____ Contact Info _____

Videographer: _____ Contact Info _____

Florist: _____ Contact Info _____

(It is preferred that flowers be left for Sunday services; recognition of Bride and Groom will be announced in church bulletin.)

Please complete, sign, and return this form to the church office. Once received, one of our pastors will be in touch to confirm details in order to submit to the Session for approval.

Please list all members of the wedding party below. As able, please provide name, age, and approximate height as outlined. If you know the pairs in which you would like the bridal party to process/ recess, please match accordingly.

Flower girl(s): Name _____ Age _____
 Name _____ Age _____

Ring bearer(s): Name _____ Age _____
 Name _____ Age _____

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|-----------------------|---------|-----------|---------|
| Matron/Maid of Honor: | Height: | Best Man: | Height: |
| _____ | _____ | _____ | _____ |

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|----------------------------------|------------|
| Matron/Maid of Honor/Bridesmaid: | Groomsman: |
| _____ | _____ |

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| Bridesmaid: | Groomsman: |
| _____ | _____ |

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| Bridesmaid: | Groomsman: |
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| Bridesmaid: | Groomsman: |
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| Bridesmaid: | Groomsman: |
| _____ | _____ |

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| Bridesmaid: | Groomsman: |
| _____ | _____ |

By signing below, you are indicating that you have reviewed and will abide by the *Wedding Guidelines of First Presbyterian Church of Lynchburg*. Failure to do so may result in a cancelled or postponed celebration.

| | | |
|--------------------|--------------------|-------|
| _____ | _____ | _____ |
| Signature of Bride | Signature of Groom | Date |