

Wedding Request Form

To begin the approval process for your wedding, please turn this form back in to the Wedding Offices with your \$100 deposit. If we are unable to schedule your wedding, your deposit will be returned.

Bride's Name: _____
Trinity Member? Yes No
Home Phone: _____
Work Phone: _____
Cell Phone: _____
Address: _____
City, State, Zip: _____
E-mail Address: _____

Groom's Name: _____
Trinity Member? Yes No
Home Phone: _____
Work Phone: _____
Cell Phone: _____
Address: _____
City, State, Zip: _____
E-mail Address: _____

1st Choice Wedding Date: _____
1st Choice Wedding Time: _____
2nd Choice Wedding Date: _____
2nd Choice Wedding Time: _____

Room for Wedding (please check one)
 West Sanctuary (seats 1700) NMC (seats 400)

Do you want your reception at Trinity? Yes No
Room for Reception (please check one)
 West Sanctuary (holds 1000) NMC (holds 200) Upper Room (holds 110) Press

Additional Package Options*:
Simple Lighting Package \$75 Yes No
Advanced Lighting Package (price to be negotiated) Yes No
Video Package \$500.00 (West Sanctuary only) Yes No
Special Graphics Package \$50 and up Yes No

**Final decision must be communicated to your coordinator at least six weeks prior to your wedding.*

Wedding Coordinator:
Please indicate below if you have a preference for a wedding coordinator. If not, we will be happy to assign one to you.
My preference is _____ No Preference _____

Pastor Performing Ceremony: _____
Pastor's Contact Information: _____