Wedding Reservation Request Form Section I: Please have each member of the couple fill out this part individually:

Last Name	First Name	Middle Initial		Preferred Pronouns	
Address		City	State	Zip Code	
Email address			Preferred Telephone #		
	out your faith background, i rch, have you been a mem		•	ition, were you	
Have you been n	narried before? Yes/No	If yes, how many	times?		
Do you have any	children? Yes/No If yes,	will they be partici	pating in the we	edding? Yes/No	
******	**********	*******	******	*******	
Last Name	First Name	Middle In	 itial Pro	eferred Pronouns	
Address		City	State	Zip Code	
Email address			Preferred Telephone #		
	out your faith background, i rch, have you been a mem		•	ition, were you	
Have you been n	narried before? Yes/No	If yes, how many	times?		

Do you have any children? Yes/No If yes, will they be participating in the wedding? Yes/No

Section II: Please fill this portion out together

What date(s) would you like for your wedding?				
Do you have any date flexibility? Yes/No Are you looking at any other venues? Yes/No				
Why do you desire to have your wedding at Westminster Presbyterian Church?				
If you aren't a member of Westminster, what relationship or connections do you have to WPC?				
What type of ceremony do you desire to have? Do you have any unique or unusual requests or circumstances it would be helpful for us to know about?				
What questions do you have that weren't answered in the Wedding Guideline Brochure?				

Please submit your completed questionnaire to the Westminster Presbyterian Church office. We look forward to working with you as you celebrate this special occasion!