

# WEDDING APPLICATION

## St. Johannes Lutheran Church

DATE: \_\_\_\_\_

(843) 722-8906

Email: [office@stjohanneschurch.org](mailto:office@stjohanneschurch.org)

Full Name of Groom: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Full Name of Bride: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Date and Time of Wedding: \_\_\_\_\_ Guests expected: \_\_\_\_\_

Date and Time of Rehearsal: \_\_\_\_\_ Guests expected: \_\_\_\_\_

Number of Bridal Attendants: \_\_\_\_\_ Number of Groomsmen: \_\_\_\_\_

We will not confirm and reserve the date/time for your wedding until your application - along with a \$250 deposit - is received. Reservations are held for two weeks following the initial conversation/meeting as a grace period to allow cancellation without penalty. After this period, the wedding date becomes confirmed and the deposit will be processed as a nonrefundable fee.

*\*After printing out this form, please sign and date below and return with your deposit.*

*Make checks payable to: St. Johannes Lutheran Church*

*(please note in the memo line the date and name of wedding)*

*Our mailing address is: St. Johannes Lutheran Church, P.O. Box 21927, Charleston, SC 29413*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

<b><i>To be completed by office</i></b>					
Deposit Rec'd:	Date:	_____	Amount:	_____	Check    Cash
Final Payment Rec'd:	Date:	_____	Amount:	_____	Check    Cash