

PRELIMINARY WEDDING INFORMATION
Forest Chapel United Methodist Church
680 West Sharon Road
Cincinnati OH 45240

BRIDE INFORMATION

Full Name of Bride _____ Phone _____

Address _____ Age _____

Home Phone _____ Work Phone _____ FCUMC Church Member? yes no

Have you been previously married? _____ Children? _____

GROOM INFORMATION

Full Name of Groom _____ Phone _____

Address _____ Age _____

Home Phone _____ Work Phone _____ FCUMC Church Member? yes no

Have you been previously married? _____ Children? _____

WEDDING ARRANGEMENTS

Proposed Wedding Date _____ Time _____

Proposed Rehearsal Date _____ Time _____

Initial Request for Officiating Minister _____

Name/Address of billing:

Please return to:
Forest Chapel United Methodist Church
680 W Sharon Road
Cincinnati OH 45240

A \$100 deposit is required to reserve the church, and
can accompany this form.

