

Wedding Application

McFarlin Memorial UMC

419 S. University

Norman, OK 73069

Phone 405-321-3484 Fax 405-321-3498

Date of Application: _____

Wedding Date: _____ Time: _____

Date of Rehearsal: _____ Time: _____

Reception Location: _____ Time: _____

Is either bride or groom a McFarlin Member? _____

Are Parents or Grandparents McFarlin Members? _____

Bride's Full Name: _____

Address: _____

Home Phone: _____ Work or Cell: _____

E-Mail Address: _____

Groom's Full Name: _____

Address: _____

Home Phone: _____ Work or Cell: _____

E-Mail Address: _____

Facility Desired for Wedding: Sanctuary _____ Chapel: _____

Will there be a Reception at McFarlin?: _____

Facility Desired: Atrium _____ Fenn Hall _____

Officiating Minister: _____

(If outside, of what faith?) _____

Person in charge of Decorating: _____

Phone: _____ Work or Cell _____

This person should contact the Wedding Coordinator.

Photographer: _____ Phone: _____

Videographer: _____ Phone: _____

Florist: _____ Phone: _____

Caterer: _____ Phone: _____

A \$100 nonrefundable deposit is required to reserve the date and space for a wedding.

An additional \$100 nonrefundable deposit is required to reserve the date and space for a reception.

No wedding or reception will be booked without this deposit.

This deposit will be credited toward your balance if no damages to property occur.

These deposits will not be refunded in the event of a cancellation.

Receipt for Deposit

Wedding Location Booked _____ Total Cost \$ _____

Wedding Deposit Paid \$ _____ Date Paid: _____

Reception Location Booked _____ Total Cost \$ _____

Reception Deposit Paid \$ _____ Date Paid: _____

Remaining due \$ _____ Remainder due by: _____

By: Kirsten Agar, Office Manager

Signature

I have read and agree to follow the policies as stated in the McFarlin Wedding Handbook.

Signature Bride: _____

Signature Groom: _____

Date: _____

Office Use:

Wedding Coordinator: _____

AWR: _____ AWP: _____ AWE: _____ AWA: _____