

Hosanna Lutheran Church
Initial Wedding Planning Form

_____ and _____
(Bride's Last name) (Groom's Last Name)

(date submitted or amended: ___/___/___)

Requested Date and Time for Wedding:

Date: ___/___/___ Time: _____ (a.m. or p.m.)

Bride Information

Full name (first, middle, last):

Address:

Phone:

(____) _____ - _____

Groom Information

Full name (first, middle, last):

Address:

Phone:

(____) _____ - _____

Rehearsal: ___yes ___no

If yes, date: ___/___/___ time: ___:___ a.m. or p.m. place: _____

Approximate size of Wedding: _____

Communion?: ___yes ___no

OFFICE USE ONLY

Comments _____

Calendared?: ___yes ___no

Route to: ___GZ ___AM ___MM ___DT ___Altar Guild