

Wedding Planning

To reserve your wedding date: please return completed form at least 3 weeks in advance.

Officiant _____ Organist _____

Wedding of Bride/Groom _____

Bride/Groom _____

Wedding Date ____ / ____ / ____ Time _____ AM/PM

Rehearsal Date ____ / ____ / ____ Time _____ AM/PM

Preferred Contact Person _____

Phone _____ E-mail _____

Honor Attendants

Name _____ Designation _____

Name _____ Designation _____

Name _____ Designation _____

Name _____ Designation _____

Bridesmaids (count) _____ Ushers (count) _____

Flower Girl(s) (count) _____ Ring Bearer(s) (count) _____

Approximate number of guests _____

We will have:

Communion YES NO

Candles in Windows (\$150) YES NO

Receiving line at church YES NO

Pictures in church afterward YES NO

Video YES NO

Soloist/Instrumentalists _____

Programs YES NO

Printed by Grace Church YES NO

If yes, program format 8.5 x 11 Folded Booklet, black & white (no charge) Other: starting at \$250

Florist _____ Phone _____

Will florist arrange altar flowers YES NO

Flowers left for Sunday YES NO

If yes, bulletin should read: _____

Questions? Please call the parish office at (973) 377-0106 or e-mail parish@gracemadison.org
 Grace Episcopal Church, 4 Madison Ave, Madison, NJ 07940
 www.gracemadison.org