

**Our Saviour's Lutheran Church
Wedding Application**

Requested Wedding Date: _____ Time: _____

Alternate Wedding Date: _____ Time: _____

Requested Rehearsal Date: _____ Time: _____

Alternate Rehearsal Date: _____ Time: _____

Fellowship Hall Reception: () Yes () No

Time Requested for Hall: _____

Couple's Information

Name: _____

Name: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Address: _____

Address: _____

Membership: _____

Membership: _____

OSLC Policies

We have read to the Wedding Policies and Procedures of Our Saviour's Lutheran Church, and we agree to abide by the policies of the congregation. We agree to submit 50% of the wedding fees in order to reserve the church, and we agree that the remaining balance is due one month prior to the wedding.

Signature

Signature

Date

Date

For Office Use Only

The date requested for the rehearsal (_____) and the date requested for the wedding service (_____) have officially been approved with the following provisions:

Signature of Pastor

Total Due to Church: \$ _____

Note: All fees for the Minister of Music, Musicians, and the Wedding director should be paid directly to them.

Received Deposit of \$ _____ On _____ By _____
(Amount) (Date) (Signature)

Received Payment of \$ _____ On _____ By _____
(Amount) (Date) (Signature)

Received Payment of \$ _____ On _____ By _____
(Amount) (Date) (Signature)

Received Payment of \$ _____ On _____ By _____
(Amount) (Date) (Signature)

Paid in Full on _____ by _____
(Date) (Signature)

