

First Lutheran Church Wedding Checklist

Wedding Date _____ Time _____ am pm

Rehearsal Date _____ Time _____ am pm

Bride's full name _____ Age _____

Phone _____
(home) _____ (other) _____

Email address _____

Groom's full name _____ Age _____

Phone _____
(home) _____ (other) _____

Email address _____

Address _____
(street)

_____ (city) _____ (state) _____ (zip)

Witnesses signing the license _____
(man)

_____ (woman)

Time the facility needs to be open: _____ am pm

Will a unity candle be used? No Yes

Do you need a stand for it? No Yes

Will aisle candles be used? (\$40 rental) No Yes

Flowers left after the wedding for church use? No Yes

Special needs or other items: No Yes (explain below)

Presiding Pastor _____