

WEDDING CONTRACT

We	edding Date: Cerem	nony Start Time: #	# Attendants # Guests expected	
Rel	nearsal Date:	Reh	earsal Start Time:	
N	ame of Bride:		Name of Groom:	
E	mail address:		Email address:	
С	ell phone:		Cell phone:	
Α	ddress:		Address:	
		Other Weddi	ng Information	
Red	ception Time:	Reception Location:		
Bri	de's Parents:	Pho	ne:	
Gro	Groom's Parents: Pho		ne:	
Photographer: Florist:				
1.	Additional time following serv	vice - \$100/half hour, \$200/h	mall) Unity Candles (set of 3) - \$75 (large) our ontral Christian Church – Texarkana.	Initials /
2.	I understand this wedding will be conducted by Rev. Wes Byas of Central Christian Church – Texarkana. The bride and groom hereby request of of			
		(Name of assisting minister) (Church affiliation) asked by the minister of Central Christian church to serve as an assisting minister of this service.		/
3.	any accident, injury or loss that m	ight arise during this wedding and	Christian Church, its members, staff and officers for I the events appertaining thereto. They also agree asurance policy covering the event.	/
	(Name and address	of primary insurance company or	n whose policy this wedding is insured.)	
4.	We have read the Guidelines for Weddings at Central Christian Church booklet and agree to abide by its provisions.			
5.	We will be responsible for seeing photographers, florists, attendants and others understand these policies.			/
6.	We understand our reservation will not be confirmed until the contract is complete and has been returned to the church Office, along with a check for \$1,500 for non-members / \$600 for members, toward total fees owed.			
7.	We agree the remaining balance of fees will be paid no later than 10 days prior to the wedding.			/
Bri	de's Signature:	Date:	Groom's Signature:	Date: