

Wedding Application  
15th Avenue Christian Church  
(Disciples of Christ)  
3600 Rock Island, IL 61201  
309-786-6925

Sally Plumery, Secretary  
Secretary@15thavechristianchurch.org



Wedding date \_\_\_\_\_ Time \_\_\_\_\_

Bride's full name \_\_\_\_\_ Home phone \_\_\_\_\_  
Cell phone \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_

Groom's full name \_\_\_\_\_ Home phone \_\_\_\_\_  
Cell phone \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_

Rehearsal date & time \_\_\_\_\_

Reception to be held at church Yes \_\_\_\_\_ No \_\_\_\_\_

How many guests are invited to the wedding? \_\_\_\_\_

Time you wish to have access to the church on wedding day. \_\_\_\_\_

Participants in the wedding party:

Attendants \_\_\_\_\_

Readers \_\_\_\_\_

Soloist \_\_\_\_\_ phone \_\_\_\_\_

Photographer \_\_\_\_\_ phone \_\_\_\_\_

Videographer \_\_\_\_\_ phone \_\_\_\_\_

Florist \_\_\_\_\_ phone \_\_\_\_\_

Office Use Only:

Wedding Packet provided \_\_\_\_\_  
Minister \_\_\_\_\_  
Choir Director \_\_\_\_\_  
Custodian \_\_\_\_\_

Deposit received \_\_\_\_\_  
Wedding Hosts \_\_\_\_\_  
Bell Director \_\_\_\_\_  
Sound tech \_\_\_\_\_