

Christian Reformed Church
395 North Cedar Street, Imlay City, MI 48444
810-724-4315

REQUEST FOR USE OF CHURCH FACILITIES

Keep a copy for your records.

For Council Use cc to office secretary Approved: Yes / No By WHOM: _____ Date Notified: _____ By Whom _____

WEDDING FORM - MEMBERS

The cost for a WEDDING: \$175 ~ There is ALSO a DEPOSIT FEE: \$100

Bride's First/Last Name: _____ **Groom's** First/Last Name: _____

Name of Minister: _____ Minister's Phone Number: _____

Minister's Church Affiliation: _____

Estimated number of people attending: _____

You have approval to use the following: Sanctuary, Nursery (used for Bride & Bridesmaids dressing room), Library (for groomsmen if needed), Bathrooms

Wedding Day/Date:	circle one	M	TU	W	TH	F	SA
Month: _____	Day: _____	Year: _____					
Time: _____ am/pm to _____ am/ pm	Doors to be unlocked by: _____ am/pm						

Rehearsal Day/Date:	circle one	M	TU	W	TH	F	SA
Month _____	Day _____	Year _____					
Time: _____ am/pm to _____ am/ pm	Doors to be unlocked by: _____ am/pm						

I/We agree to abide by the policies of Imlay City Christian Reformed Church and understand fully the cost and other related responsibilities involved in renting the church building, equipment, and property owned by the church.

Signed: _____ Name (Please Print): _____

Address: _____ City/Zip Code: _____

Telephone Home: _____ Work _____

Fee Information:

Deposit Required: \$100 send w/Request Form – the deposit will secure the date upon approval.

Total Fees: \$175 (separate from deposit-due 2 weeks prior to the date of the Wedding)

Fees for Minister & Organist are not included, secure fees and delivery of payments directly to them.

For Office Use Only: Deposit Received Date _____ Total Fees Received Date _____