

*Please complete this portion and return to the Church Office for approval.*

**WEDDING APPLICATION**

**DATE OF WEDDING** \_\_\_\_\_

**I would like to use the following:**

\_\_\_ *Sanctuary* Rehearsal Start time: \_\_\_ End time: \_\_\_ Wedding Start time: \_\_\_ End time: \_\_\_  
\_\_\_ *Fellowship Hall* for the Rehearsal Dinner. Date: \_\_\_ Start time: \_\_\_ End time: \_\_\_  
\_\_\_ *Fellowship Hall* for the Reception. Start time: \_\_\_ End time: \_\_\_

Expected attendance: Rehearsal Dinner \_\_\_\_\_ Wedding \_\_\_\_\_ Reception \_\_\_\_\_

I \_\_\_ am/ \_\_\_ am not a regular attendee of the C&MA Church.

Why do you wish to be married in this church?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Groom's Name** \_\_\_\_\_ Age \_\_\_\_\_ Occupation \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Address \_\_\_\_\_

How long have you known the bride? \_\_\_\_\_ Have you been divorced? \_\_\_\_\_ Widowed? \_\_\_\_\_

Where do you attend church? \_\_\_\_\_

Please attach your church's Statement of Faith.

Do you have a personal relationship with Jesus Christ? (EXPLAIN)

\_\_\_\_\_  
\_\_\_\_\_

**Brides's Name** \_\_\_\_\_ Age \_\_\_\_\_ Occupation \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Address \_\_\_\_\_

How long have you known the groom? \_\_\_\_\_ Have you been divorced? \_\_\_\_\_ Widowed? \_\_\_\_\_

Where do you attend church? \_\_\_\_\_

Please attach your church's Statement of Faith.

Do you have a personal relationship with Jesus Christ? (EXPLAIN)

\_\_\_\_\_  
\_\_\_\_\_

Who will perform your wedding ceremony? Minister's Name \_\_\_\_\_

Church \_\_\_\_\_ Phone \_\_\_\_\_

By whom will you receive premarital counseling? \_\_\_\_\_

## SPECIAL REQUIREMENTS

(Check all that apply—Approval is necessary)

\_\_\_\_\_ Kitchen: I will be using the church kitchen for my rehearsal dinner.

\_\_\_\_\_ Kitchen: I will be using the church kitchen for my reception.

\_\_\_\_\_ Nursery: I will need nursery care for the wedding for children up through age 3.

Nursery Designee \_\_\_\_\_ Phone: \_\_\_\_\_

Additional Workers \_\_\_\_\_

\_\_\_\_\_ A/V Requests: Please Specify \_\_\_\_\_

\_\_\_\_\_ Piano (*please let us know if it needs to be moved*)

\_\_\_\_\_ Organ

\_\_\_\_\_ Early Setup Request: Date/time \_\_\_\_\_ (Rehearsal begins at \_\_\_\_\_)

\_\_\_\_\_ Move pulpit

\_\_\_\_\_ Move communion table

\_\_\_\_\_ Special Setup (Please Describe) \_\_\_\_\_

**Service People Involved in Wedding:** If you know who will be involved in the following categories, please supply name and phone number. *If you do not have the information at this time, please contact the Church Office one month before the wedding with this information.*

Wedding Coordinator \_\_\_\_\_

Florist \_\_\_\_\_

Rentals \_\_\_\_\_

Other \_\_\_\_\_

***Affidavit of Requester:*** I am the person responsible for the use of the facilities requested, and I agree to abide by and to enforce the rules governing the use of the facilities requested. I understand that neither the church nor its Administrative Board assumes any responsibility for loss of property or for accidents or injury resulting from the use of these facilities.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

# WEDDING GUIDELINES AND APPLICATION

The Christian & Missionary Alliance Church  
308 Elmhurst Street Morgantown, WV 26505  
304.599.4549 cma@cmachurch.net

***Congratulations!*** The CMA Church is available for use by those who regularly attend our services. All other requests are reviewed by the Pastoral Staff. This form contains an application and some guidelines to help you with the planning of your special event. We ask that you review this before deciding on our facility for your wedding. Please submit the application as early as possible.

## TO GET THINGS STARTED

***Please check with the Pastor that you want to officiate to see if he is available on the date you are requesting.***

Submit your application. Completion of the application does not guarantee availability of the facilities requested. A limited number of dates are available due to frequent use of the facilities by various church ministries. The Administrative Board or its designee will consider the application and give approval or disapproval. You will be contacted when a decision has been made. Once approved please pay one half of the amount of the fees. At this time, the date and time will be reserved on the church calendar.

## SIX MONTHS BEFORE WEDDING

Make appointments with your Pastor to schedule Premarital Counseling. ***Premarital Counseling is required.***

## ONE MONTH BEFORE WEDDING

Call the Church Office to make certain everything is in order on the calendar. If necessary, schedule a time to meet and look over the facility for flower placement, dressing rooms, nursery, etc.

**Please note:** *If your wedding is being performed by a pastor outside of The Morgantown C&MA Church, you are required to attach your church's Statement of Faith*

## SCHEDULE OF FEES

*Please call the church office if you have any questions about the fees.*

Non-Attendees	<b>Fellowship Hall</b>	\$100
AV Technician Fees	\$100 for first five hours; \$20 per hour after first five hours <i>(To be paid directly to the AV Technician <u>before the ceremony.</u>)</i>	

*Please note: These fees do not include honorarium for clergy, musicians, custodian, etc. Those are to be determined by the wedding couple and paid directly to the people involved.*