

**LELAND COMMUNITY UNITED METHODIST CHURCH  
CHURCH WEDDING APPLICATION FORM**

Date of wedding (month, day, year): \_\_\_\_\_

Place and Time of Wedding Service: \_\_\_\_\_

Place and Time of Wedding Reception (if other than Leland Community UMC):  
\_\_\_\_\_

**BRIDE:**

All given names: \_\_\_\_\_

Marital status: \_\_\_\_\_ never married, widowed, or divorced \_\_\_\_\_ divorced

If divorced, give date when the divorce was finalized: \_\_\_\_\_

Religious affiliation: \_\_\_\_\_

Birth date (month, day, year): \_\_\_\_\_

Age on wedding day: \_\_\_\_\_

City, town, state/province or country of birth: \_\_\_\_\_

Current address (before marriage): \_\_\_\_\_

Home telephone: \_\_\_\_\_

Work telephone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's name: \_\_\_\_\_

**GROOM:**

All given names: \_\_\_\_\_

Marital status: \_\_\_\_\_ never married, widowed, or divorced \_\_\_\_\_ divorced

If divorced, give date when the divorce was finalized: \_\_\_\_\_

Religious affiliation: \_\_\_\_\_

Birth date (month, day, year): \_\_\_\_\_

Age on wedding day: \_\_\_\_\_

City, town, state/province or country of birth: \_\_\_\_\_

Current address (before marriage): \_\_\_\_\_

Home telephone: \_\_\_\_\_

Work telephone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's name: \_\_\_\_\_

**OTHER GENERAL INFORMATION:**

Officiating minister: \_\_\_\_\_

Address after wedding: \_\_\_\_\_

Full Name of Maid of Honor: \_\_\_\_\_

Full Name of Best Man: \_\_\_\_\_

We have carefully read the Procedural Guidance and Information sheet for weddings at LELAND COMMUNITY UNITED METHODIST CHURCH in LELAND, MICHIGAN, and will comply with the established guidelines.

Signature of the bride: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of the groom: \_\_\_\_\_

Date: \_\_\_\_\_