

WEDDING APPLICATION FORM

(Please print clearly)

Wedding Date: _____ Time: _____

FULL NAME: _____

Address: _____

Tel # Home: _____ Work: _____

e-mail address _____

FULL NAME: _____

Address: _____

Tel # Home: _____ Work: _____

e-mail address _____

Association with Barrington Congregational Church (if any) _____

For Office Use Only

Minister:

Member

Fees:

Payment:

Non-member