



Isle of Hope United Methodist Church

412 PARKERSBURG ROAD · SAVANNAH, GEORGIA 31406-6431

OFFICE (912) 355-8527 · FAX (912) 355-9113

www.iohumc.com

Wedding Information Form

WEDDING DATE _____ TIME _____

REHEARSAL DATE _____ TIME _____

MINISTER'S NAME _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Are the bride, groom or their parents members of this church? _____

If yes, name(s) _____

BRIDE'S FULL NAME _____

Address _____

City _____ State _____ Zip _____

Home # _____ cell # _____ e-mail _____

PARENT'S NAME _____

Address _____

City _____ State _____ Zip _____

Home # _____ cell # _____ e-mail _____

GROOM'S FULL NAME _____

Address _____

City _____ State _____ Zip _____

Home # _____ cell # _____ e-mail _____

PARENT'S NAME _____

Address _____

City _____ State _____ Zip _____

Home # _____ cell # _____ e-mail _____

How many total attendants in wedding party? _____

Bridesmaids _____ Groomsmen _____ Others _____

Wedding Director _____ Phone # _____

Email Address: _____

Photographer _____ Phone # _____

Email Address _____

Organist _____ Phone # _____

Email Address: _____

Florist's Name _____ Phone # _____

Email Address: _____

The florist will need entrance to the church on _____ (date) @ _____ (time).

Do you plan to use the church Ministry Center (Members Only) for your reception? _____

Caterer's Name _____ Phone # _____

Email Address: _____

The caterer will need entrance to the church on _____ (date) @ _____ (time).

Do you need the church sound system for a reader, singer or other? _____

Do you want the church video? _____

Will the bride dress at the church? _____

Will the bride's attendants dress at the church? _____

Will the groom dress at the church? _____

Will the groomsmen dress at the church? _____

We encourage you to leave your wedding flowers in the Sanctuary for Sunday Services.

If you chose to share them with us, an acknowledgement will be placed in the church bulletin.

Do you wish to leave your flowers? _____

The following information, if available, would be of assistance to us:

FUTURE ADDRESS _____

City _____ State _____ Zip _____

Future Phone # _____

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Please return this form with your church fee as soon as possible.

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I have read the Wedding Rules and Policies for the Isle of Hope United Methodist Church. I understand my responsibility to insure that my groom and I, as well as all of our family and friends, adhere to these rules and regulations.

Bride's Signature _____

Wedding Director's Signature _____