

# Williamsburg Baptist Church

227 Richmond Road, Williamsburg, VA 23185

757-229-1217

[churchoffice@williamsburgbaptist.com](mailto:churchoffice@williamsburgbaptist.com)

## Wedding Reservation Request

NAMES/PRONOUNS \_\_\_\_\_ & \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_ PHONE \_\_\_\_\_

MEMBER(s) OF WBC? \_\_\_\_ YES \_\_\_\_ NO

IF YES, MEMBER NAME(S) \_\_\_\_\_

IS A PARENT OR GRANDPARENT A MEMBER OF WBC?

IF YES, NAME(S) \_\_\_\_\_

WEDDING DATE \_\_\_\_\_ TIME \_\_\_\_\_ # OF GUESTS \_\_\_\_\_ (approx.)

\_\_\_\_\_ SANCTUARY \_\_\_\_\_ SOCIAL HALL/KITCHEN \_\_\_\_\_ SOUTH WING

REHEARSAL DATE (Usually evening before) \_\_\_\_\_ TIME \_\_\_\_\_

*We agree to comply with the policies and regulations as set forth by Williamsburg Baptist Church regarding church weddings and use of facilities.*

WEDDING COUPLE:

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**RETURN FORM TO THE CHURCH OFFICE AS SOON AS POSSIBLE TO CONFIRM REQUEST.**

APPROVED BY:

WBC PASTOR \_\_\_\_\_ DATE \_\_\_\_\_

WORSHIP COUNCIL \_\_\_\_\_ DATE \_\_\_\_\_

WEDDING COORDINATOR \_\_\_\_\_ DATE \_\_\_\_\_