Wedding Application

Cornerstone Ministries – 2200 Cornerstone Lane – Murrysville, PA 15632
Phone: 724.733.0070 – Fax: 724.733.5458

Date of Application: _____

Name of the Bride: _____

Occupation: _____

Home Phone: _____ Cell: _____

E-mail: _____

Address: _____

Age of Bride: _____ Member of Cornerstone: Yes / No

Do you attend regularly? Yes / No How long? _____

Name of the Groom: _____

Occupation: _____

Home Phone: _____ Cell: _____

E-mail: _____

Address: _____

Age of Groom: _____ Member of Cornerstone: Yes / No

Do you attend regularly? Yes / No How long? _____

Date Requested: _____

Rehearsal: Date: _____Day of Week: _____Preferred time: _____

Wedding: Date: _____ Day of Week: _____Preferred Time: _____

If Bride/Groom is out of the area please list church/contact info:

_____

Location of wedding venue: _____

If wedding is to be at Cornerstone will you need sound amplification? Yes / No Will you need video projection? Yes / No

Have you read Cornerstone's wedding policy manual? Yes / No

We understand that this application does not guarantee date, time or venue of our wedding.

X_____ Bride

X_____ Groom

Please return to Cornerstone Ministries Caring Department