

FIRST PARISH IN CONCORD
20 LEXINGTON ROAD
CONCORD, MA 01742

WEDDING INFORMATION AND APPLICATION FORM

Bride _____ Groom _____
Address _____ Address _____

Phone (h) _____ Phone (h) _____
(w) _____ (w) _____
E-mail _____ E-mail _____

Wedding Date _____ Rehearsal Date _____
Time _____ Rehearsal Time _____
Place _____ Anticipated number of guests _____

Requested Minister (if preference exists) _____
Organist _____ Phone _____
Sexton _____ Phone _____
Wedding Coordinator _____ Phone _____

Is someone other than the bride or groom in charge of arrangements? _____
Name _____ Phone _____
Address _____
E-mail Address _____

Florist: _____ Phone _____
Please describe floral decorations _____
Would you like to leave the flowers here for Sunday? _____

Photographer/Videographer: Phone or Email _____
Will any other equipment be needed? _____

Location of reception _____

Please note:

- ❖ Receipt of this form, with your \$35 application fee, will confirm your wedding date on the First Parish calendar