

Wedding Facility Reservation

Trinity Lutheran Church * 940 Creston Road, Paso Robles, CA 93446
805-238-3702 * fax 805-238-7501

Wedding Date:	Time of Wedding:	Facility Requested: Church <input type="checkbox"/> Fellowship Hall <input type="checkbox"/> Other <input type="checkbox"/> Please explain: _____
Rehearsal Date:	Time of Rehearsal:	
Bride:	Phone:	
Groom:	Phone:	
Responsible Party:	Phone:	
Signature:	Today's Date:	

Pastor Authorization: _____ Date: _____

Security Deposit: A refundable deposit of \$200 is required at the time of scheduling. This money is separate from the wedding fees and will be refunded following the event if no additional charges are incurred.

Date Received: _____ Secretary's Signature: _____

Standard Wedding Fees:	Members	Non-Members	
Sanctuary Use and Custodial Service	Included	Included	
Pastor	Honorarium	Included	
Wedding Hostess	Included	Included	
Organist	Included	Included	
Sound & Lighting Tech	Included	Included	
Paid in full - one month prior to event	Total \$575	Total \$1,000	CK# _____ Date _____
Audio Visual	\$50/Per Hour	\$50/Per Hour	
Wedding Candles	\$28	\$28	
Wedding Bulletin Covers	See Church Secretary	See Church Secretary	
Fellowship Hall Fee	\$100	\$450	
FH Custodial Service	\$100 approximately	\$100 approximately	
Total	\$	\$	CK# _____ Date _____

I have completely read and understand the Wedding Booklet and guidelines of Trinity Lutheran Church and agree to be responsible for the fulfillment of all the requirements. I agree to assume full financial responsibility for any damage to Church property or equipment.

Groom's Signature: _____ Date: _____ Bride's Signature: _____ Date: _____

Please contact the Wedding Hostess, who will inform you of the necessary steps for a successful wedding at Trinity Lutheran Church.

Secretary's Signature: _____ Date: _____