

**PRESBYTERIAN CHURCH OF THE CROSS**  
**1517 South 114<sup>th</sup> Street**  
**Omaha Nebraska 68144**  
**402-333-7466**

**Wedding Reservation Form**

Welcome, we're glad you've decided to celebrate your wedding with us. Please complete this form and return it to the church office. Your date will be confirmed and placed on the church calendar as soon as we receive the completed form.

**Bride's Name:** \_\_\_\_\_

**Groom's Name:** \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_

Bride's complete address:

Groom's complete address:

Phone # Cell: (\_\_\_) \_\_\_-\_\_\_\_\_

Phone # Cell: (\_\_\_) \_\_\_-\_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Previously Married: Yes \_\_\_ No \_\_\_

Previously Married: Yes \_\_\_ No \_\_\_

Parents: \_\_\_\_\_

Parents: \_\_\_\_\_

**Wedding Date Desired:** \_\_\_/\_\_\_/\_\_\_ **Alternate Date:** \_\_\_/\_\_\_/\_\_\_ **Time:** \_\_\_\_\_

**Rehearsal Date:** \_\_\_/\_\_\_/\_\_\_ **Rehearsal Time:** \_\_\_\_\_ **Location:** \_\_\_\_\_

**Officiating Minister:** Dr. Marshall Zieman \_\_\_\_\_

Guest Pastor: \_\_\_\_\_

Affiliation: \_\_\_\_\_

**Organist:** \_\_\_\_\_

**PCOC's A/V Team:** \_\_\_\_\_

**Vocalist:** \_\_\_\_\_

**No. of: Bridesmaids** \_\_\_\_\_

**Add'l Musicians:** \_\_\_\_\_

**Groomsmen** \_\_\_\_\_

**Liturgist:** \_\_\_\_\_

**Ushers** \_\_\_\_\_

**Wedding Reception Location:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Address after Marriage:** \_\_\_\_\_

I have read and accept the "Wedding Guidelines for Presbyterian Church of the Cross" and will cooperate accordingly:

**Signature of Bride:** \_\_\_\_\_ **Signature of Groom:** \_\_\_\_\_

*Approved by Staff:* \_\_\_/\_\_\_/\_\_\_ *Approval Copy Sent to Bride* \_\_\_/\_\_\_/\_\_\_