

Ebenezer Wedding Information Form

| | | | |
|---|---|-----------------------------|------------------------------|
| RECORDING DATE | MONTH | DAY | YEAR |
| NAME OF GROOM | (LAST) | (FIRST) | (MI) |
| NAME OF BRIDE | (LAST) | (FIRST) | (MI) |
| DATE/TIME OF WEDDING | DATE | TIME | |
| LOCATION OF WEDDING | <input type="checkbox"/> EBC <input type="checkbox"/> OTHER (SPECIFY) | | |
| DATE/TIME OF REHEARSAL | DATE | TIME | |
| LOCATION OF REHEARSAL | <input type="checkbox"/> EBC <input type="checkbox"/> OTHER (SPECIFY ADDRESS) (CITY/STATE/ZIP) | | |
| DATE/TIME OF RECEPTION | DATE | TIME | |
| LOCATION OF RECEPTION | <input type="checkbox"/> EBC <input type="checkbox"/> OTHER (SPECIFY ADDRESS) (CITY/STATE/ZIP) | | |
| | GROOMSMEN | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | BRIDESMAIDS | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | FLOWER GIRL | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | RING BEARER | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | USHERS | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | DOUBLE RING CEREMONY | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | ANOINTING | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | UNITY CANDLE | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | POEM/STATEMENT | <input type="checkbox"/> NO | <input type="checkbox"/> YES |
| | NAME OF BEST MAN | | |
| NAME OF MAID(MATRON) OF HONOR | | | |
| NAME OF WEDDING COORDINATOR | | | |
| MUSICIAN NEEDED? <input type="checkbox"/> NO <input type="checkbox"/> YES | | | |
| SOLOIST NEEDED? <input type="checkbox"/> NO <input type="checkbox"/> YES | | | |

