



Wedding Planner and Scheduling Form

New Hope Friendship Missionary Baptist Church

D.R. Anderson, Pastor

2205 Harrison Avenue - P.O. Box 13489 - San Diego, California 92170-3489
phone (619) 234-5506 - fax (619) 696-8932

Today's Date _____

Date of Wedding _____

Time of Wedding _____

BRIDE

GROOM

Name

Address

City, State, Zip

Home Phone

Work Phone

Cell or Pager Number

E-Mail Address

Member of New Hope?

Officiating Minister: D.R. Anderson, Pastor

Other: _____

Note: Pastor Anderson must approve of any minister.

Counseling Dates and Times

Rehearsal Dates and Times

#1 _____

#1 _____

#2 _____

#2 _____

Facilities Needed: *Please note - you must fill out a Facilities Request Form in addition to this form if you are using any of the facilities of New Hope Friendship M.B.C..*

Sanctuary Chapel Classrooms PA System Fellowship Hall Instruments

Reception Location: _____

FACILITIES FEES: *If you are current a member in good standing according to the church bylaws, no fees will apply. (Additional fees may apply for Minister honorarium)*

Non members of New Hope Friendship must contact the office for facility use fees.
*Please note that **no alcoholic beverages, illegal drugs or smoking** is allowed on the property. Also, all music should be appropriate for the occasion and reviewed by the Minister of Music. All deposits, etc. must be received at least thirty (30) days prior to the ceremony.*

Approved: _____ (Pastor)

Approved: _____ (Administrator)

Approved: _____ (Facilities Director)