

**SCHEDULE OF WEDDING FEES
(NON-MEMBERS OR REGULAR ATTENDEES)
BLOOMINGTON FREE METHODIST CHURCH**

(Put check mark next to fees that apply)

Refundable Deposit	\$100_____	Sanctuary Use Fee (Item 1, first page)	\$250_____
Pastor's Fee (Includes pre-marital counseling)	\$150_____	Organist	\$100_____
Projection Technician	\$ 50_____	Wedding Coordinator	\$ 75_____
Sound Technician	\$ 50_____		
Use of Fellowship Hall for Rehearsal Dinner		\$ 50 (plus \$100 deposit)	_____
Use of Fellowship Hall for Wedding Reception		\$ 50 (plus \$100 deposit)	_____

NOTE: DEPOSIT MUST BE PAID TO GUARANTEE RESERVATION. ALL fees are to be paid prior to the day of the REHEARSAL. Deposit will be refunded according to the final condition of the facilities used, according to Item 1, first page of this contract.

RESERVATION REQUEST FORM

Wedding Date_____ Time_____ Rehearsal Date_____ Time_____

Fellowship Hall

 Rehearsal Dinner Date_____ Time_____

 Reception Date_____ Time_____

Decorating or Preparation Date_____ Time_____

Other Date_____ Time_____

If changes are made to the original times you have listed for ceremony, rehearsal or reception, you must notify the Church Office in advance. Otherwise, we may not be able to honor your change in schedule.

Deposit Paid \$_____ Date_____ Balance Due \$_____

Balance Paid \$_____ Date_____

We have read, understand, and agree to abide by the general policy statements listed above.

Signature of Bride-to-be

Signature of Groom-to-be

Signature of Pastor

Date