

# Avon United Methodist Church

## Parishioner Wedding Application

Updated 8/2023

Wedding Date:	Wedding Time:
Rehearsal Date:	Rehearsal Time:
<b>Groom's Information</b>	<b>Bride's Information</b>
Name:	Name:
Address:	Address:
Phone:	Phone:
Email:	Email:

Wedding Fees	Parishioners	✓
<ul style="list-style-type: none"> <li>● <b>Pastoral Services &amp; Premarital Counseling</b></li> <li>● <b>Sanctuary &amp; 2 Dressing Rooms</b> (5 hrs. day of ceremony)</li> <li>● <b>Custodian</b></li> <li>● <b>2 Sound technicians</b></li> <li>● <b>Wedding Coordinator</b> Includes 2 hr. planning + 2 hr. rehearsal + 5 hr. wedding day. Time beyond this will be an add'l \$25 per hour.</li> <li>● <b>Co-Wedding Coordinator</b> Include 1 ½ hr. rehearsal + 2 ½ hr. wedding day. Time beyond this will be an add'l \$20 per hour</li> </ul>	\$680	
<p><b>Organist</b> The wedding party is responsible for contacting our organist, Dianne Perry (317-796-3198), directly to discuss music selections. This would include 15-20 minutes of pre ceremony music as well as ceremony music.</p>	Add'l \$150	
<p><b>2 hour onsite reception</b></p> <ul style="list-style-type: none"> <li>● Custodial fee (\$150)</li> <li>● Wedding Coordinator fee (\$50)</li> </ul>	Add'l \$200	
Half of Fellowship Hall (Max. 100 guests)		
All of Fellowship Hall (Max. 250 guests)		
<p><b>Total (Payable to Avon UMC)</b> (½ due at the time your application is submitted with the balance due 14 days prior to your wedding)</p>		

<b>*Damage Deposit</b> (Your damage deposit should be written as a SEPARATE check and submitted to the church office, along with your remaining balance, 14 days prior to your event. If there is no damage, your check will be returned to you.)	<b>\$150 refundable</b>	
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Required Fees should be made payable directly to AUMC. A church affiliated custodian, sound technician, wedding coordinator and co-wedding coordinator are required for AUMC weddings. I have read and understand the fee schedule proposed by the Avon United Methodist Church.

\_\_\_\_\_  
**Bride's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Groom's Signature**

\_\_\_\_\_  
**Date**

Office Use Only

<b>Wedding Space &amp; Pastoral Fees</b>	Amount	Date received	Check Number
Initial Deposit			
Remaining Balance			
\$150 Damage Deposit			