

CRCC WEDDING APPLICATION

(check all that apply)

Requests may be done by downloading this form, printing, and filling it in.

You may also apply in person at the Castle Rock Christian Church office located at
542 Huntington Ave S, Castle Rock, WA 98611

Any question, please call Pastor John Leffler at 274-6771

Bride's Information

Name: _____

Address: _____

E-mail address: _____

Home Phone: _____ Best time to be reached here: _____

Work phone: _____ Best time to be reached here: _____

Cell phone: _____ Best time to be reached here: _____

Date of birth: _____ Years completed in school: _____

Please check all that apply: () First marriage () Widowed Remarried ()
2nd 3rd 4th

Household members living in the home (names, ages & relationship):

Do you attend Castle Rock Christian Church? _____ If yes, for how long? _____

Are you living together at this time? _____ If yes, for how long? _____

Groom's Information

Name: _____

Address: _____

E-mail address: _____

Home Phone: _____ Best time to be reached here: _____

Work phone: _____ Best time to be reached here: _____

Cell phone: _____ Best time to be reached here: _____

Date of birth: _____ Years completed in school: _____

Please check all that apply: () First marriage () Widowed Remarried ()
2nd 3rd 4th

I have read the Wedding Policies _____ and _____ (please initial that you have read and understand the policies)

You can see the policies on our web page at www.castlerockchristianchurch.org
and click on "Printable Forms"

Your story...

Date you first met: _____ (roughly)

How you met:

Date of your first date: _____ Date you became engaged: _____

Briefly describe the proposal:

Briefly describe how and when you both became Christians:

If you not believers (Christians), please describe why you desire your wedding in a church building.

****Please note: *Completing this application and /or pre-marital counseling does not assure you at your request for a pastor or facility until you receive confirmation from Pastor John Leffler. While we do our best to meet these requests, there are sometimes conflicts due to pastor’s prior commitments or church events.***

Wedding date and time request:

First choice: _____ Alternative: _____

Wedding Rehearsal date and time request:

(Normally the Evening before the Wedding)

First choice: _____ Alternative: _____

Location of wedding:

CRCC building: _____ Other: _____

Location of Reception:

CRCC building: _____ Other: _____

Size of wedding party/attendees:

Approximate # in wedding party: _____ Approximate # in attendance: _____

Is there any other information that you think might be pertinent for us to know? _____
If yes, please explain below:

You may reach Pastor John at the church office 274-6771 or by email at pastorjohn@castlerockchristianchurch.org