Wedding Worksheet

PLEASE FILL OUT AND RETURN TO SAINT LUKE'S PROMPTLY. EMAIL: ELIZABETHGLICK@STLUKESHHI.ORG

Name of Bride:				
Desired Wedding Date:		Time:	AM/PM	I
Contact Information:				
Bride: Email:	Pho	ne:		
Groom Name:	Pho	ne :		
Clergy Officiating:				
Communion (Y/N)	_			
How many will be included in th	ne wedding party?_			
aid of Honor:		one:		
Best Man:	Phone:			
Rehearsal Date:	Time:	AM/PM		
Number of Bridesmaids:	Flower Girls:	Ring Bearer:	(Y/N)	
Mother of Bride (name):				
Mother of Groom (name):				
Grandmothers (names):				
o. of Pews Needed: Bride: Groom:				
Bride's Dressing Room Needed (Y/N) Tir	ne of Arrival (Day (Of):	AM/PM

QUESTIONS? PLEASE CONTACT THE CHURCH OFFICE, 843-785-4099

