



**Stonebriar Community Church**  
**Request for Wedding Reservation**  
4801 Legendary Dr. Frisco, Texas 75043 469-252-5200

**Bride** (full name): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ E-Mail: ( ) \_\_\_\_\_

Number of Previous Marriages: ( ) Children: \_\_\_\_\_ Ages: \_\_\_\_\_

Do both parents approve? \_\_\_\_\_

Reason for divorce (s) (please use attached sheet): \_\_\_\_\_

Member of Stonebriar Community Church since: \_\_\_\_\_

Bride's Parents: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Church Membership: \_\_\_\_\_

**Groom** (full name): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ E-Mail: ( ) \_\_\_\_\_

Number of Previous Marriages: ( ) Children: \_\_\_\_\_ Ages: \_\_\_\_\_

Do both parents approve? \_\_\_\_\_

Reason for divorce (s) (please use attached sheet): \_\_\_\_\_

Member of Stonebriar Community Church since: \_\_\_\_\_

Groom's Parents: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Church Membership: \_\_\_\_\_

**Wedding Date:** First Choice: \_\_\_\_\_ Time: \_\_\_\_\_

Second Choice: \_\_\_\_\_ Time: \_\_\_\_\_

**Rehearsal:** Date: \_\_\_\_\_ Time: \_\_\_\_\_



Estimated number of guests attending: \_\_\_\_\_

Marriage Foundations—Have you attended? ( ) Yes ( ) No When \_\_\_\_\_

Will attend: When \_\_\_\_\_

**SCC Facilities Needed:**

**Wedding Ceremony:** ( ) Worship Center ( ) Classroom (Room # \_\_\_\_\_)

**Reception Site:** ( ) Classroom (Room # \_\_\_\_\_) ( ) Away from church

**SCC Kitchen:** ( ) Yes ( ) No

**Pastor:** I would like the following Stonebriar Community Church pastor to perform our ceremony:

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

*\*Please also fill out the Request for Pastor to Perform Wedding form on our website [keyword:wedding].*

**Guest Pastor:** Must be an ordained minister of the Gospel to perform your ceremony at Stonebriar and be approved by the Stonebriar ministries. Please complete the Guest Pastor Request form (Appendix D) and submit to Wedding Coordinator. **Pastor Name and Church:** \_\_\_\_\_

**Organist:** \_\_\_\_\_ **Pianist:** \_\_\_\_\_

**Florist:** \_\_\_\_\_ **Caterer:** \_\_\_\_\_

**Photographer:** \_\_\_\_\_ **Videographer:** \_\_\_\_\_

*We have read and understand the policies concerning weddings held at Stonebriar Community Church and we agree to follow these policies as stated herein. We will do our utmost to see that members of our wedding party understand and follow these policies.*

With this application, we are enclosing the reservation fee/security deposit of \$250. We understand that nothing is officially on the church calendar until this form and deposit are returned to the wedding coordinator, and the dates and location have been confirmed with the bride.

We understand that it is our responsibility to contact Stonebriar Pastoral Ministries to enroll in the *Marriage Foundations* course. We understand that we must complete *Marriage Foundations* at least 30 days prior to the wedding date.

**Bride:** \_\_\_\_\_ **Groom:** \_\_\_\_\_

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

**After your wedding: Home Address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Phone ( )** \_\_\_\_\_

**Please give this completed form and the \$250 security/damage deposit to Marge Ditka. This will secure your reservation on the church calendar.**