



Bethel  
Church

# Wedding Request Form

702 W. Alcott Ave. • Fergus Falls, MN 56537  
218-736-5654 • [office@bethellutheran.church](mailto:office@bethellutheran.church)

Wedding Date: \_\_\_\_\_

Today's Date: \_\_\_\_\_

**Names:**

Bride: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Groom: \_\_\_\_\_ Phone: \_\_\_\_\_

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

The Wedding Coordinator and Reception Coordinator (if applicable) will be notified of your desired wedding date after your Wedding Request Form has been signed by a Bethel pastor and a deposit is received:

Wedding held at Bethel? \_\_\_\_\_ If yes, which campus: BL or FF

If no, where: \_\_\_\_\_

Time of wedding: \_\_\_\_\_ (to completed by 5 pm)

Number of Bridesmaids/Groomsmen: \_\_\_\_\_ } Please estimate as close as possible

Number of expected guests: \_\_\_\_\_

Rehearsal date and time: \_\_\_\_\_

Rehearsal dinner at Bethel? \_\_\_\_\_ (to be completed by 7 pm)

\*If yes, which campus: BL or FF

Reception at Bethel? \_\_\_\_\_ (to be completed by 7 pm)

\*If yes, which campus: BL or FF

Premarital Counseling Pastor request: \_\_\_\_\_

Officiating Pastor Request: \_\_\_\_\_

**Bethel Connection?**

\_\_\_ My/Our parent(s) are active members of Bethel  
Parent(s) Name(s): \_\_\_\_\_

\_\_\_ My/Our parent(s) regularly attend Bethel  
Parent(s) Name(s): \_\_\_\_\_

\_\_\_ I am an active member of Bethel  
\_\_\_ I have regularly attended Bethel (since \_\_\_\_\_)  
\_\_\_ I have no current affiliation with Bethel

Your wedding and pre-marital counseling will be performed by a Bethel pastor and assigned upon availability. If you wish to have another pastor perform or participate in the ceremony, please have them contact one of the pastors at Bethel Church (736-5654 or [office@bethellutheran.church](mailto:office@bethellutheran.church)) prior to submitting this request form.

**Pre-Marital Counseling is required.** If you wish to receive counseling from someone other than a Bethel pastor, please provide the following contact info:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Bethel pastor's signature:**

\_\_\_\_\_

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

**cc:** ☐ Director of Operations ☐ Lead Pastor  
☐ Faith@Home Pastor ☐ BL Campus Pastor  
☐ Worship ☐ Wedding Coordinator ☐ Custodian  
☐ Reception Coordinator ☐ Other \_\_\_\_\_

**Office Use Only:** \_\_\_ active member

\_\_\_ active parishioner

\_\_\_ other \_\_\_\_\_

Approved \_\_\_\_\_

Added to Calendar \_\_\_\_\_

Pastor/Officiant \_\_\_\_\_

Deposit \_\_\_\_\_

Check # \_\_\_\_\_

Church Use \_\_\_\_\_

Custodian \_\_\_\_\_

Sound \_\_\_\_\_

Wedding Coordinator \_\_\_\_\_

Reception Coordinator \_\_\_\_\_

Reception? \_\_\_\_\_

Rehearsal Dinner? \_\_\_\_\_

Organist \_\_\_\_\_

Pianist \_\_\_\_\_

Other \_\_\_\_\_