



APPLICATION INFORMATION

Name of Celebrant: _____

Contact No: _____

Address: _____

OCCASION CELEBRATED?

Birthday Specify Age: _____

Wedding Anniversary Jubilee: _____

Wedding Thanksgiving Date Married?: _____ Wedding Venue: _____

Other (Please Specify): _____

EVENT INFORMATION

Requested Thanksgiving Date: _____ Expected Number of Guests: _____

Request Submitted by: _____

Additional Information: _____

OFFICE USE ONLY

Comments/Remarks

Booking Officer:		
Date Form Filled:		
Action taken by Booking Officer:		
Event Team Notified:	Yes/No	
Pastor's Notified:	Yes/No	