

Application for Marriage at Woodlawn United Church

DATE & TIME OF 1 ST MEETING:	MINISTER:	DATE:
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When the application is received a Member of the Ministerial Staff will be in touch with you to arrange a date for your first appointment. A \$150.00 non-refundable deposit is required on or before your first meeting in order to confirm your booking.

Please do not make any other arrangements regarding your wedding until this booking is confirmed.

Please print all information required by this form. Keep in mind that some of this information may be used for processing your Marriage Certificate and it is imperative that it is legible and that all spellings are correct. We understand that you may not know all the details yet, but please fill out the requested information to the best of your ability at this time.

Name of Applicant 1 _____
Surname All Given Names

Name of Applicant 2 _____
Surname All Given Names

Requested Date for Wedding _____ Time _____

Requested Date for Rehearsal _____ Time _____

What will be your address following your Wedding?

Street _____

City _____ Province _____ Postal Code _____

Telephone Number(s) _____

Email Address(es) _____

Why do you wish to be married at Woodlawn United Church? _____



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Applicant 1 Information

CURRENT CONTACT INFORMATION

Surname		Given Names		(What do you prefer to be called)
Civic Address	Number	Street Name		
City		Province	Postal Code	
Home Telephone	Cell phone	Work Telephone	Extension	
Place of Work	Occupation	Email		

PERSONAL INFORMATION

Date of Birth	Place of Birth (City/Province or State/Country)			
Father's Name	Surname		Given Names	
	City		Province/State	Country
Father's Place of Birth	City		Province/State	Country
	City		Province/State	Country
Mother's Maiden Name	Surname		Given Names	
	City		Province/State	Country
Mother's Place of Birth	City		Province/State	Country
	City		Province/State	Country
Have you ever been married? No <input type="checkbox"/> Yes <input type="checkbox"/> Widowed? <input type="checkbox"/> Divorced? <input type="checkbox"/> <i>Please provide the details of the final decree below</i>				
Date of Decree	Province/State/Country where divorce was granted			
Do you have children?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many?	_____
What are their names & ages?	_____			

RELIGIOUS INFORMATION

Religious Affiliation _____
(For Example: United Church of Canada, Anglican, Baptist, Pentecostal, Presbyterian/Roman Catholic/No Christian Affiliation/Other World Faith/Other/No Religious Affiliation)

Have you or a family member had/have an historic affiliation with WUC?
 No Yes In what way? _____



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Applicant 2 Information

CURRENT CONTACT INFORMATION

Surname		Given Names		(What do you prefer to be called)
Civic Address	Number	Street Name		
City		Province	Postal Code	
Home Telephone	Cell phone	Work Telephone	Extension	
Place of Work	Occupation	Email		

PERSONAL INFORMATION

Date of Birth	Place of Birth (City/Province or State/Country)			
Father's Name	Surname		Given Names	
Father's Place of Birth	City	Province/State	Country	
Mother's Maiden Name	Surname		Given Names	
Mother's Place of Birth	City	Province/State	Country	
Have you ever been married?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Widowed? <input type="checkbox"/>	Divorced? <input type="checkbox"/> <i>Please provide the details of the final decree below</i>
Date of Decree	Province/State/Country where divorce was granted			
Do you have children?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many?	_____
What are their names & ages?	_____			

RELIGIOUS INFORMATION

Religious Affiliation _____
(For Example: United Church of Canada, Anglican, Baptist, Pentecostal, Presbyterian/Roman Catholic/No Christian Affiliation/Other World Faith/Other/No Religious Affiliation)

Have you or a family member had/have an historic affiliation with WUC?

No Yes In what way? _____



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Wedding Service Information

ROLE	LEGAL NAME	RELATIONSHIP
LEGAL WITNESSES		
<i>Witnesses must be at least 16 years old.</i>		
Witness 1		
Address		
Phone Number(s)		
Email Address		
Witness 2		
Address		
Phone Number(s)		
Email Address		
WEDDING PARTY		
Attendants		
Ushers		
Ring Bearer	Age: ____	
Flower Bearer	Age: ____	
Other (please specify)		



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Weddings performed at Woodlawn United Church are officiated by a residing minister. Other clergy may participate only at the invitation of the residing minister.

- Do you wish to have any other clergy person take part in your wedding? YES ___ NO ___
 Name & Relationship _____ Contact Information _____
- How do you wish for them to participate?

MUSIC

The live performance of organ or piano music at your wedding is the responsibility of the Director of Music who has the right of first refusal. The use of and care of the instruments at Woodlawn United are the responsibility of the Director of Music and any substitutes must be approved by the Director.

- Do you wish to have the organ or piano at your wedding? Yes No
It is the responsibility of the intended couple to contact the Director of Music. You will be provided with contact information at the time of booking.
- Do you plan to have a singer or singers at your wedding? Yes No
 Name of singer(s) _____ Contact Information _____
 Name of singer(s) _____ Contact Information _____
- Do you plan to use any additional music? Other musicians, from a cd, etc.? Musician CD

If you choose to use a cd or USB Storage Device please make a copy and have it clearly labelled with the selections for the Sound Technician to play during your ceremony.

Please use this area to specify any musical selections that you may have in mind for your wedding. Music chosen should reflect the service of faith-based worship. Music selected for your wedding will be discussed with the presiding Minister and the Director of Music.

PHOTOGRAPHY/VIDEOGRAPHY

- Do you have an official photographer/videographer? Yes No
 Name _____ Contact Information _____
 It may be beneficial for the Videographer to attend the rehearsal to stage the optimum location for set up.



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FOR YOUR INFORMATION

BULLETINS/PROGRAMS

- a) Bulletins/Programs: Bulletins or Programs are not prepared by the church and are the responsibility of the intended couple. The contents of such must be reviewed with the Minister prior to use. Please discuss during your meetings with the presiding Minister. The Minister will send the Order of Worship to the couple prior to the wedding.
- b) Candle Lighting: *Please note that with the exception of The Christ Candle, which will be lit during the worship is provided by the church. However, the church does not supply other candles or candle holders.*

- a. There is an option to have family members from each family light a candle at the beginning of the service to represent the family. Later in the service, the bride and groom use those candles to light one unity candle symbolizing the joining of the families.

Do you wish to have candle lighting as part of your ceremony? Yes No

If so, by whom?

Name _____ Relationship _____

Name _____ Relationship _____

- c) Marriage Preparation Course: If you wish to prepare for your marriage, Rev. Linda Yates offers an online Marriage Preparation Course.

- d) Exchanging of Rings: One Spouse Both Spouses None

It is encouraged that the ring bearer be equipped with mock rings and the actual rings remain in the safekeeping of a responsible adult.

ADDITIONAL INFORMATION

The following pages are not to be completed until the initial meeting with the Minister. Please familiarize yourselves with the information so that you may ask/answer any questions that may arise from the content.

To be completed by the Minister:

Other Wedding particulars, including the order of service, will be planned and reviewed at the Ministers discretion. Please use the remainder of this page for notes.



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Wedding Fees & Payment Policies

Confirmed Wedding Date: _____ **Time** _____

All Payments and Marriage License are due by: _____

SERVICE	FEE	FOR OFFICE USE ONLY			
		Please check	Please place your initials and the date in the appropriate column when the action is complete		
		Required	Received from Couple	Forwarded to Treasurer	Person Responsible Contacted
Non Refundable Deposit	\$150.00				
Sanctuary*	\$250.00				
Minister	\$350.00				
Music Fee If attendance is required at rehearsal	\$200.00 +\$50.00				
If required to accompany soloist	+\$50.00				
Administrative Fee	\$50.00				
Caretaker (deposit)	\$100.00				
Sound Technician (basic)	\$50.00				
Basic plus CD Music	\$100.00				
Marriage License					



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1. This Application must be submitted to the church office for processing. When processing is complete, you will be contacted by the Minister.
 - a. The Application must be received at least **3 months** prior to the requested wedding date.
2. **All fees must be paid by cash or cheque.** Cheques that are returned NSF will be charged a \$62.50 admin fee.
3. A **\$150.00** deposit is required on or before your first meeting in order to confirm your booking.
 - a. This deposit is non-refundable but is applied to the total fees required.
 - b. The booking **will not** be confirmed until your first meeting.
4. Payments will be accepted up to 30 days prior to the wedding.
5. *The Solemnization of Marriage Act* requires that each couple obtain a Marriage License before getting married.
 - a. You may purchase a Marriage License from a Deputy Issuer at a HRM Customer Service Centre and at most Access Nova Scotia Centres if not obtained in HRM.
 - b. A full list of Deputy Issuers is available on the web at <http://www.gov.ns.ca/snsmr/vstat/deputy>.
 - c. The Wedding License is valid for three months from date of issue.
6. **The Marriage License is due at least 30 days prior to the wedding.**

Important Note

The use of tobacco, alcohol or illegal drugs on church property is strictly prohibited.

The following conditions must be met to avoid cancellation or postponement of your wedding ceremony.

- In possession of the Marriage License
- Fees paid on time.
- Presence of two witnesses 16 years of age or older.
- Both spouses must be present.
- Intended couple and/or all Witnesses must not be or be suspected to be under the influence of recreational drugs, including marijuana, and/or alcohol.

MAILING ADDRESS

Woodlawn United Church
54 Woodlawn Road
Dartmouth, Nova Scotia
B2X 1A9

Office Telephone:
(902) 434-8302

CONTACT ON-LINE

Office:

office@woodlawnunited.ca

Reverend Phillip Kennedy: **phillip.kennedy@woodlawnunited.ca**

Reverend Mary Lynne Whyte **marylynn.whyte@woodlawnunited.ca**

Website:

www.woodlawnunited.ca



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SIGNATURES

We, the undersigned, hereby certify that we have read this document and the supplemental Brochure titled "Weddings At Woodlawn" in their entirety. Our signatures certify that we understand the provisions to be the policy of Woodlawn United Church with respect to weddings. We understand that all matters pertaining to our wedding are subject to this policy and we agree to communicate its provisions to all persons involved with our wedding. We further understand that failure to comply with these provisions may, at the discretion of the presiding minister, result in the interruption of the impending wedding or the interruption and/or cancellation of the service while it is in progress. In such cases, there is no appeal and any fees or deposits that have been made shall be forfeited.

Furthermore, our signatures certify that the information provided by us on the preceding forms is accurate to the best of our knowledge.

Applicant 1 _____
Print Name Signature Date

Applicant 2 _____
Print Name Signature Date

Minister _____
Print Name Signature Date

