Elberon Memorial Church

The Moses Taylor Memorial · 70 Park Avenue, Elberon, NJ 07740
elberon.church

Wedding Reservation and Registration Form

Today's Date: _____

Requested Wedding Reservation Date: _____

Wedding Day of the Week: _____

Time: _____ am / pm (circle one)

Bride's Full Name: _____

Email: _____

Full Address: _____

Telephone — Home: _____ Work: _____ Cell: _____

Groom's Full Name: _____

Email: _____

Full Address: _____

Telephone — Home: _____ Work: _____ Cell: _____

Name, Address & Phone of the Clergyperson you expect to perform the wedding:

_____

Wedding Rehearsal Date: _____

Are you using a Wedding Planner? Y / N

If yes, name and phone of the Planner: _____

Number of guests (approximately) expected to attend: _____

> **Note:** If the number of attending guests exceeds 50, there may be an additional charge of $150 so that we can provide the highest level of personalized service and attention on your special day.

To begin the process of reserving the church, please return this form and a check in the amount of **$800 (non-refundable)** made payable to **Elberon Memorial Church**. Please note that there are additional charges for the Organist (**$400**) and the Church Sexton (**$300**), payable when your date is confirmed.

Mail to: Elberon Memorial Church, c/o Robert D. Broege, Esq., Attention: Wedding Reservations, 160 White Rd., Ste 204, Little Silver, NJ 07739-1167

Please be sure to **provide a date and time for the wedding** in the spaces above. We cannot process your request without that information. Once the date/time of your wedding has been confirmed, **it cannot be changed without prior approval.**

For further information, please contact: Sharon Lees · (732) 687-8430

I have read and understand the wedding guidelines for weddings at Elberon Memorial Church.

Signature: _____ Date: _____