The Reverend Rebecca A. Nagy

[*http://www.acharlotteweddingminister.com*](http://www.acharlotteweddingminister.com)

Ceremony Planning Questionnaire

**Please email back to me:** revrebeccan@gmail.com

|  |  |
| --- | --- |
| PLEASE TELL ME HOW YOU FOUND ME: |  |

## Wedding Information

|  |  |  |  |
| --- | --- | --- | --- |
| Wedding date: |  | Ceremony Time: |  |
| Date of Rehearsal: |  | Time of Rehearsal: |  |
| Wedding Venue: |  |
| Name of Wedding Director: |  | Phone Number: |  |
| Wedding Director’s E-Mail: |  |

## Bride’s Information

|  |  |
| --- | --- |
| Bride’s Full Legal Name: |  |
| Do you have a nickname you want used in the ceremony? |  |
| Bride’s Address: |  |
| Bride’s Home Phone: |  | Cell Phone: |  |
| Work Number:  |  | Work Extension: |  |
| Bride’s Email: |  |
| Employer: |  | Position: |  |
| Bride’s Date of Birth: |  | Age on wedding day: |  |
| Is This Your First Marriage? |  |
| Children? | [ ]  Yes | [ ]  No | Ages: |  | Name: |  |
| Is the Bride: | [ ]  Religious | [ ]  Spiritual | [ ]  Neither |

## Groom’s Information

|  |  |
| --- | --- |
| Brides’s Full Legal Name: |  |
| Do you have a nickname you want used in the ceremony? |  |
| Groom’s Address: |  |
| Groom’s Home Phone: |  | Cell Phone: |  |
| Work Number:  |  | Work Extension: |  |
| Groom’s Email: |  |
| Employer: |  | Position: |  |
| Groom’s Date of Birth: |  | Age on wedding day: |  |
| Is This Your First Marriage? |  |
| Children? | [ ]  Yes | [ ]  No | Ages: |  | Name: |  |
| Is the Groom: | [ ]  Religious | [ ]  Spiritual | [ ]  Neither |

## Ceremony Information

|  |  |
| --- | --- |
| IS THERE ANY REASON WHY YOU MAY NOT LEGALLY BE MARRIED? |  |
| Site at Your Wedding (please highlight *all* that apply): |  |
| Inside – Outside: | [ ] Home | [ ] Church | [ ] Park |
| [ ] Hotel | [ ] Hall | [ ] Museum |
| [ ] Bed-And-Breakfast | [ ] Historic Site | [ ] Other: |  |
| What **State** is the Ceremony in? |  |
| What **County** is the Ceremony in? |  |
| Name of Venue: |  |
| Address of Venue: |  |
| Contact Person: |  | Phone Number & extension: |  |
| Phone Number to Reach You **on Your Wedding Day**: |  |

## Let’s Discuss Your Ceremony Preferences

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Will your wedding be:  | [ ]  Formal | [ ]  Semiformal | [ ]  Informal | [ ]  Casual |
| Is yours an Interfaith wedding? | [ ]  Yes | [ ]  No |  |  |
| A Multicultural Wedding? | [ ]  Yes | [ ]  No |  |  |
|  | If so, please specify |  |
|  | Would you like to include any specific traditions from your culture or religion? (Fill below) |
|  |  |
| Do you desire your ceremony to be: | [ ]  Secular-Civil | [ ]  A Nonreligious Ceremony only |
| [ ]  Religious – if so, what denomination |
| [ ]  Spiritual not heavily religious |
| [ ]  Other: |  |
| Is it permissible to use the terms: | [ ]  Spirit | [ ]  Creator | [ ]  The Divine | [ ]  God | [ ]  Heavenly Father |
| Is it permissible to include: | [ ]  Prayer? | [ ]  Blessing? |
| How many attendants are in your wedding party? | Bridesmaids: |  | Groomsmen: |  |
| Are there children in your wedding party? | Ring Bearer/s: |  | Flower Girl/s: |  |
| Additional members of the wedding party? |  |
| Will Someone Accompany the Bride down the aisle? |  | Who? |  |
|  |
| ***Bride:*** |
| Tell me about your parents, Are they… | [ ]  Together | [ ]  Separated | [ ]  Divorced |
|  | Mother’s Name: |  |
|  | Father’s Name: |  |
|  | Sibling 1: |  |
|  | Sibling 2: |  |
|  |
| ***Groom:*** |
| Tell me about your parents, Are they… | [ ]  Together | [ ]  Separated | [ ]  Divorced |
|  | Mother’s Name: |  |
|  | Father’s Name: |  |
|  | Sibling 1: |  |
|  | Sibling 2: |  |

## Ceremony Vendors:

|  |  |  |  |
| --- | --- | --- | --- |
| **Vendor** | **Name** | **Email Address** | **Phone Number** |
| **Coordinator/Planner** |  |  |  |
| **Photographer** |  |  |  |
| **Videographer** |  |  |  |
| **Flowers** |  |  |  |
| **Cake** |  |  |  |
| **Live Music** |  |  |  |
| **DJ** |  |  |  |
| **Other:**  |  |  |  |  |
| **Other:** |  |  |  |  |