

## Your Wedding at St. James Episcopal Church

4620 California Street, SF, CA 94118

Tel. 415-751-1199; Fax 415-751-1545

e-mail [stjames@stjamesf.org](mailto:stjames@stjamesf.org)

We want to be married at St. James Church:

Name (Bride):

Address:

Telephone:

e-mail:

Name (Groom):

Address:

Telephone:

e-mail:

Rehearsal Date:

Time:

Wedding Date:

Time:

**Number of guests** (approx.):

**Reception** at St. James? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Officiant:** We'll bring our minister \_\_\_\_\_; We want a St. James minister \_\_\_\_\_

**Flowers:** We'll do our flowers \_\_\_\_\_; We want St. James to do flowers \_\_\_\_\_

**Aisle Candles:** \_\_\_\_\_ Yes \_\_\_\_\_ No

**Music:** We'll provide our music \_\_\_\_\_; We'd like a St. James organist, if available \_\_\_\_\_

How did you hear about St. James? \_\_\_\_\_

### Schedule of Fees

|   |        |
|---|--------|
| _____ Church for Wedding and Rehearsal and use of Bride's Room/Groom's Room | \$1400 |
| _____ St James to provide minister for planning, rehearsal and wedding      | \$500  |
| _____ Pre-marital counseling by St. James minister (fee to be determined)   |        |
| _____ Wedding Coordinator for rehearsal and wedding (required)              | \$250  |
| _____ St. James Organist for wedding only                                   | \$200  |
| _____ Parish Hall for Reception (3 hours)                                   | \$300  |
| _____ Aisle Candles   | \$100  |

Please check the services that you desire.

YOUR TOTAL: \_\_\_\_\_

A deposit of 50% of the total is due with this signed form. Please make checks payable to "The Community Learning Center at St. James". The balance is due 3 days before the wedding. We look forward to welcoming you to St. James!

We commit to the date, time, services and terms of payment indicated above.

Signed and dated: Bride: \_\_\_\_\_ Groom: \_\_\_\_\_