

Wedding Fee Agreement

Date: _____

I, _____, request use of the facilities and/or services of Antioch United Methodist Church for a wedding on *(date)* _____, at *(time)* _____ and agree to pay the applicable fees as follows:

Member:

Use of facilities:

Sanctuary	None	\$ <u>n/a</u>
Fellowship Hall		
Rehearsal Dinner	None	\$ <u>n/a</u>
Reception	None	\$ <u>n/a</u>

Custodial Fees:

Sanctuary	\$25.00	\$ _____
Rooms	\$25.00	\$ _____
Fellowship Hall	\$150.00	\$ _____

\$50.00 is returned to you if you leave the fellowship hall cleaned.

Pastor: \$150.00 \$ _____

Non-Member:

Use of facilities:

Sanctuary	\$100.00	\$ _____
Fellowship Hall		
Rehearsal Dinner	\$50.00	\$ _____
Reception	\$50.00	\$ _____

Custodial Fees:

Sanctuary	\$25.00	\$ _____
Rooms	\$25.00	\$ _____
Fellowship Hall	\$150.00	\$ _____

\$50.00 is returned to you if you leave the fellowship hall cleaned.

Pastor: \$150.00 \$ _____

Total Due: \$ _____

Deposit: \$ _____

Balance Due: \$ _____

Groom, bride, or representative

Pastor