

**NON-ATTENDERS**

**WEST COUNTY ASSEMBLY OF GOD**  
13431 North Outer 40 Road, Chesterfield, MO 63017  
Telephone (314) 434-1058 FAX (314) 434-9290  
APPLICATION FOR FACILITY USAGE  
WEDDING/ REHEARSAL DINNER/ RECEPTION

(Office Use Only)	
Approved	_____
Calendar	_____
<b>COPY TO:</b>	
Coordinator	_____
Custodian	_____
Sound Dept.	_____

**BRIDE'S NAME:** \_\_\_\_\_ **HOME PHONE #** \_\_\_\_\_ **WORK #** \_\_\_\_\_

**CELL PHONE** \_\_\_\_\_ **E-MAIL** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**GROOM'S NAME:** \_\_\_\_\_ **HOME PHONE #** \_\_\_\_\_ **WORK #** \_\_\_\_\_

**CELL PHONE** \_\_\_\_\_ **E-MAIL** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**LOCAL CONTACT:** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**WEDDING DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_ **DAY** \_\_\_\_\_

**REHEARSAL DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_ **DAY** \_\_\_\_\_

**DEPOSIT & COUNSELING MATERIAL**

**DEPOSIT:** A \$50 non-refundable deposit is due with this application.

**CHECK** \_\_\_\_\_ **CASH** \_\_\_\_\_

\_\_\_\_\_ **Date \$50 Deposit Received**

**COUNSELING MATERIAL FEE:** There is a \$10 fee for premarital counseling materials when counseling is done by WCAG pastors.

\_\_\_\_\_ **Date \$10 Fee Received**

**FACILITY RENTAL FEES**

**WEDDING: A 1-hour rehearsal, 2 hours setup prior to the ceremony and a 1-hour ceremony.**

**SANCTUARY - \$700 - Seating Capacity 500 people** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Additional time is at a rate of \$25 per hour. Additional hours needed \_\_\_\_\_.

**FOYER - \$600** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs – 150 people \_\_\_\_\_ Capacity with tables & chairs – 100 people \_\_\_\_\_

Additional time is at a rate of \$25 per hour. Additional hours needed \_\_\_\_\_.

Additional cleaning fee may apply depending on event time and date.

**REHEARSAL DINNER: For 3 hours of time from start of the dinner.**

**CLC DINING ROOM - \$150** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs - 100 people \_\_\_\_\_ Capacity with tables & chairs - 63 people \_\_\_\_\_

**FAITH CENTER DINING ROOM-\$175** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs – 115 people \_\_\_\_\_ Capacity with tables & chairs – 77 people \_\_\_\_\_

Additional time is at a rate of \$25 per hour. Additional hours needed \_\_\_\_\_.

**FOYER - \$600** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs – 150 people \_\_\_\_\_ Capacity with tables & chairs – 100 people \_\_\_\_\_

Additional time is at a rate of \$25 per hour. Additional hours needed \_\_\_\_\_.

Additional cleaning fee may apply depending on event time and date.

**RECEPTION: For 3 hours of time from start of the reception.**

**CLC DINING ROOM- \$150** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs - 100 people \_\_\_\_\_ Capacity with tables & chairs - 63 people \_\_\_\_\_

**FAITH CENTER DINING ROOM-\$175** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs – 115 people \_\_\_\_\_ Capacity with tables & chairs – 77 people \_\_\_\_\_

**GYMNASIUM - \$200** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs - 400 people \_\_\_\_\_ Capacity with tables & chairs - 300 people \_\_\_\_\_

Additional time is at a rate of \$25 per hour. Additional hours needed \_\_\_\_\_.

**FOYER - \$600** YES \_\_\_\_\_ NO \_\_\_\_\_ \$ \_\_\_\_\_

Capacity with chairs – 150 people \_\_\_\_\_ Capacity with tables & chairs – 100 people \_\_\_\_\_

Additional time is at a rate of \$25 per hour. Additional hours needed \_\_\_\_\_.

Additional cleaning fee may apply depending on event time and date.

**WEDDING ACCESSORY FEES** The Church may request donations or charge for cost-sharing contribution (fees) in order to defray the estimated cost of facility use. No such fees shall be charged with any impermissible view to profit.

1 PR. 7-light candelabra, candles included (crystal votives)	\$35 per pair	\$ _____
1 3-light unity candelabra, candles included (taper candles)	\$16	\$ _____
1 3-light table unity candle	\$10	\$ _____
1 Kneeler	\$25	\$ _____
1 PR. candle lighters	\$10 per pair	\$ _____
6 plant stands @ \$1 each	\$ 6 for six	\$ _____
Arch	\$10	\$ _____
<b>TOTAL FOR WEDDING ACCESSORIES</b>		\$ _____

**GRAND TOTAL OF COSTS DUE WCAG, LESS DEPOSIT. (Check payable to West County A/G) \$ \_\_\_\_\_**

**All fees must be paid by the day of rehearsal.**

**The Wedding Policies and Procedures are also incorporated here by reference.**

**HONORARIUMS AND ADDITIONAL FEES**

**(Made out directly to parties involved, not to WCAG and give to Wedding Coordinator no later than rehearsal)**

**All fees must be paid by the day of rehearsal.**

**Minister - Honorarium.** Ask minister about honorarium.

**Musicians** – A variety of good musicians are available from WCAG. Contact Beverly Strandquist (636) 225-9961

**Sound Person** - \$250. Sound system is available only in the Sanctuary. If the sanctuary sound system is desired, a church soundman is required. This fee covers the first four hours of the sound technician's time, (This is normally two hours for rehearsal and two hours the day of the wedding), which includes set-up and tear time. Additional time is \$35 / hour.

CD of wedding included in the Sound Person fee.

TOTAL DUE Sound Technician \$250.00.

**Church Wedding Coordinator** - Fee for Church Wedding Coordinator is \$250.00. \$125.00 due at the first meeting. She will contact you by phone. All wedding arrangements should be made through the Wedding Coordinator. All honorariums should be given to the coordinator at/or before the rehearsal.

**Nursery:** Babysitting available @ \$13/ hour, per sitter. Minimum of 4 hours. Firm commitment must be made 14 days prior to wedding date.

**OTHER INFORMATION**

Minister Performing Ceremony \_\_\_\_\_ Phone # \_\_\_\_\_

Additional minister (s) \_\_\_\_\_ Phone # \_\_\_\_\_

**ACCEPTANCE**

I ACCEPT FULL RESPONSIBILITY FOR ANY DAMAGES THAT MAY OCCUR WHILE I AM USING THE CHURCH FACILITIES AND AGREE TO PAY FOR ANY REPAIRS OR REPLACEMENTS NECESSARY. I HAVE RECEIVED A COPY OF WCAG WEDDING POLICIES AND PROCEDURES AND AGREE TO ALL POLICIES AND PROCEDURES STATED THEREIN.

\_\_\_\_\_  
Signature of Responsible Party

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved By

\_\_\_\_\_  
Date

**PLEASE NOTE: Your wedding date will be confirmed when the signed contract and deposit are received and the date is approved by the staff.**