

The History Center
At Courthouse Square
PO Box 261
Berrien Springs, MI 49103

Name _____

Address _____

City/State/Zip _____

Telephone _____ Email _____

Wedding Date _____ Ceremony Time _____

Rehearsal Date and Time _____

Please read the attached policies and guidelines and ask any questions before you make plans for your wedding. Sign and date one copy of this form and return it to the museum at the address listed above. Keep one copy for your files. Please note: **Scheduled dates are not confirmed until a copy of this form and the appropriate deposit and rental fees are paid.**

I agree to conform to the Wedding Guidelines and Policies as provided to me.

Signature _____ Date _____

Check Amount _____

Credit Card Visa _____ MC _____ Discover _____

Name as it appears on Card _____

Card Number _____

Expiration Date _____ Amount _____

Signature _____