Confirming a Booking

for a Wedding or Vow Renewal at Holy Innocents Episcopal Church

561 Front Street, Lahaina, HI 96761

DATE of Ceremony:		TIME of Ceremony:
TOTAL time on Property FROM:		TO:
Package Choice:	Queen's Package	· · · · · · · · · · · · · · · · · · ·
	Historic Church Package	
	Oceanfront Lawn Package	
TOTAL NUMBER o	f guests expected:	
WEDDING COUPL	Æ:	
First, Last names of	ooth:	
Mailing Address:		
Emails of both:		
Cell Ph of both:		
WEDDING PLANN	IER: Yes No	
If yes: Name:		
Address:	444444	
Phone:		Email:
EQUIPMENT REN	TAL COMPANY:	Phone:
PERSON OFFICIAT	ING AT THE CEREMONY:	
Name:		Affiliation:
Email:		Phone:
Certificate of \$1 mi	llion liability insurance must b	be provided if wedding is not being performed by
	est. On file/attached:	Yes No
•	payable in advance attached:	
•	ate:	Ву:
Full payment of Site (OSC) fee with site for	Fee is required to secure bookinge. OSC fee is payable on the da	ng. Please DO NOT include On Site Caretaker by directly to the OSC and not to Holy Innocents.
	his form to: Holy Innocents E ₁ 561 Front Street, 1	