

**Trinity Lutheran Church, Vermillion, SD**  
**NON-MEMBER Wedding Fees**

**WEDDING BOOKLET** received: \_\_\_\_\_(Yes) \_\_\_\_\_(No)

**WEDDING DEPOSIT:** Received by \_\_\_\_\_ Check number \_\_\_\_\_

- Ⓢ **\$50** – Will be applied to overall fees for the wedding.
- Ⓢ Non-refundable
- Ⓢ Reserves the sanctuary, a pastor, and an organist.

**(FEES PAID TWO WEEKS IN ADVANCE)** \_\_\_\_\_ (Yes) \_\_\_\_\_(No)

- Ⓢ Sanctuary fee: **\$175**
- Ⓢ Organists fee: minimum of **\$150** (the church organist must be contacted about music and who will play for the wedding. (Christy Kimball, 605-670-0238)
- Ⓢ Soloist's fee: **\$50 - \$75** suggested minimum (if one is provided by the church)
- Ⓢ Custodian fee: **\$50**

**RECEPTION HERE** \_\_\_\_\_ (Yes) \_\_\_\_\_(No)

- Ⓢ Contact church for reception details – no alcohol or smoking allowed on premises
- Ⓢ Fellowship hall: **\$300** (includes set up) – accommodates 200 guests; this room is air conditioned and heated.
- Ⓢ Kitchen fee: **\$150** (includes 2 refrigerators; 2 stoves/ovens; 4 roasters; 2 coolers; 1 industrial coffee maker; 2 free-standing coffee makers; dishes; cups; glasses; silverware; serving utensils; pitchers; carafes; punch bowl & cups; dish sanitizer)
- Ⓢ Silver Service: **\$25** \_\_\_\_\_ (Yes) \_\_\_\_\_ (No)
- Ⓢ Table cloth laundry fee: **\$7 each** \_\_\_\_\_ (Yes) \_\_\_\_\_ (No) # \_\_\_\_\_

**CANDELABRAS** (2 free-standing, each holds 7 candles) (14 candles total) : **\$28** \_\_\_\_\_

**UNITY CANDLE STAND** (holds 2 taper candles) (2 candles total) : **\$4** \_\_\_\_\_

- Ⓢ Taper candles are \$2 each and must be purchased by the church for use in the candelabras and unity candle stand.
- Ⓢ Couple provides their own Unity Candle

**WEDDING BANNER** \_\_\_\_\_ (Yes) \_\_\_\_\_ (No) \_\_\_\_\_

(The banner – **P** and the words: **the two shall become one** on cream material with a faint floral print background.)

**DAMAGE DEPOSIT: \$200** \_\_\_\_\_ (Yes) \_\_\_\_\_ (No) Check # \_\_\_\_\_

The check will be returned contingent on facility being clean, orderly, trash bagged, items returned in same condition and returned to where found.

**Extreme damages will incur additional cost.**

Fees Total:

Fees Paid by: \_\_\_\_\_

Check – # \_\_\_\_\_

Date: \_\_\_\_\_

Signed \_\_\_\_\_