



## RESERVATION FORM

### Contact Information

Full Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Event Details

Type of Event:

Wedding     Baptism     Funeral     Concert/Recital     Memorial Service

Memorial Service In Garden     Special Religious Service     Other

Specify Other: \_\_\_\_\_

Number of Guests: \_\_\_\_\_

Event Date: \_\_\_\_\_ Event Time: \_\_\_\_\_

If you are scheduling a wedding, please specify:

Bride's Name: \_\_\_\_\_

Groom's Name: \_\_\_\_\_

Rehearsal Information:

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

Any additional information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please mail this form to:  
The Frank H. Kenan Chapel, 510 Arboretum Drive, Wilmington, North Carolina 28405  
*The Kenan Chapel is a 501(c)(3) charitable organization.*