

# Reservation Form

## Little Chapel-in-the-Woods, Greenhouse and University Gardens

Texas Woman's University  Office of Conference Services -- Hubbard Hall 104  P. O. Box 425379  Denton, TX 76204-5379

Telephone: 940-898-3644 Fax: 940-898-3556

Bride's Name \_\_\_\_\_ Your E-mail \_\_\_\_\_

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

Bride's Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Primary Contact \_\_\_\_\_ Phone # \_\_\_\_\_ Alternate # \_\_\_\_\_

Estimated Attendance \_\_\_\_\_ Event Type  Wedding  Service  Recital Other \_\_\_\_\_

Date of Event \_\_\_\_\_ Location  Chapel  Gardens  Greenhouse

Wedding / Event Time \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm Ceremony start time \_\_\_\_\_

Rehearsal Date \_\_\_\_\_ Rehearsal Time \_\_\_\_\_ Reception location \_\_\_\_\_

I hereby acknowledge that I have read the Operating Policies and agree to abide by the conditions as set forth therein. Any revisions can result in a change or cancellation fee. I understand that events in the Little Chapel in the Woods may involve risks. These include risks involved in traveling to and within, and returning from, the Chapel; different standards of design, safety and maintenance of utilities, facilities, and weather conditions; and other matters. I have made my own investigation, including a review of the facility and am willing to accept these risks.

Bride's or Groom's Signature \_\_\_\_\_ Date \_\_\_\_\_ Conference Services \_\_\_\_\_ Date \_\_\_\_\_  
**Should you exceed your allotted time slot, Conference Services will bill you for the additional time.**

### How were you referred to us?

I am (circle one) Faculty Staff Student Alumni  
I have a parent/relative who is (circle one) Faculty Staff Student Alumni  
I heard about the Chapel (circle one) The Knot PWG Other \_\_\_\_\_

The reason(s) why I chose the Chapel \_\_\_\_\_

Name of TWU Organization / Advisor (if applicable): \_\_\_\_\_

TWU Advisor Signature (if applicable) \_\_\_\_\_ Date \_\_\_\_\_ , ...U Center for Student Development \_\_\_\_\_ Date \_\_\_\_\_

Rental Fees for Little Chapel-in-the-Woods or Greenhouse or University Gardens: \$ \_\_\_\_\_

Additional Time: \$ \_\_\_\_\_ per hour (if available) Building Attendant @ \$ \_\_\_\_\_ per hour

Total fees paid: \$ \_\_\_\_\_

Receipt #: \_\_\_\_\_ Payment  Cash  Check  Money Order

Credit Card type/number \_\_\_\_\_ Zip (Billing Address) \_\_\_\_\_

Name on card \_\_\_\_\_ Expiration Date \_\_\_\_\_