



Sisters of the Blessed Sacrament
1663 Bristol Pike
Bensalem, PA 19020

Contact Person: Dave Greer
Phone Number: 237 - ; 84 - 3926
FAX: 215 - 244 - 7606

Name of Groom: _____

Name of Bride: _____

Desired Photography Date: _____ **Time:** _____

Address: _____ **City:** _____

State: _____ **Zip Code:** _____

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Name and Phone Number of Photographer: _____

Please have your photographer fax proof of insurance to 215-244-7606 upon completion of reservation. Please have photographer reference groom's last name when faxing. Thank you very much for your cooperation.

AGREEMENT

In consideration of the mutual covenant between Party and the Sisters of the Blessed Sacrament and intending to be bound thereby:

1. We agree to observe the following regulations when we have our wedding pictures taken on SBS grounds:
 - Pictures may be taken on the grounds only
 - We are a alcohol free campus and grounds
 - No eating or drinking
 - Please park your cars in the Mission Center parking lot while having photos taken
2. We agree to hold the Sisters of the Blessed Sacrament harmless as to any claims affected by our guests, employees, or ourselves arising out of our use of the premises.

Fee: \$150.00

Please send payment to the above address, with reference to wedding payment. We look forward to seeing you - Good luck in your future.

Signed: _____

Date: _____