



METROPOLIS
OF DETROIT

Annunciation Greek Orthodox Church

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Web: www.annunciationrochester.org • www.rochestergreekfestival.org

SACRAMENT FACILITIES RESERVATION FORM

I, _____ (name, first and last) would like to schedule a (check one):

Baptism

Wedding

On (date if known) _____

Please contact me via:

Email _____

Phone _____

CHECK ONE:

Enclosed is my check for \$_____ to fulfill the Annunciation sacrament facilities fee for sacraments.

I have already fulfilled the Annunciation facilities fee for sacraments.