

**Applewood Wedding Contract**  
**THE JAMES SHAVER WOODSWORTH HOMESTEAD FOUNDATION**  
**450 THE WEST MALL, ETOBICOKE ONTARIO M9C 1E9**  
**TELEPHONE: 416 622 4124**

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**NAMES:** \_\_\_\_\_ **and** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**TOTAL WEDDING FEE :(Officiant included) \$ 300.00 paid in advance.**

***This fee is NON REFUNDABLE. Changes are permitted a minimum of 24 hours in advance.***

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

Total Paid: \_\_\_\_\_ Rec# \_\_\_\_\_ Date: \_\_\_\_\_

Marriage License Number: \_\_\_\_\_ Date of issue: \_\_\_\_\_

**\*PROOF OF VACCINATION REQUIRED\* MAXIMUM OF 10 PERSONS PERMITTED**

It is understood and agreed that the following conditions apply:

- You must obtain an Ontario Marriage License prior to the date of the ceremony.
- This document must be presented to the Staff person or the Officiate 15 minutes prior to the ceremony
- **Marriage Licenses in Toronto are available at North York/Toronto Civic Centre by appointment.** In Toronto, call 416-392-7036 or refer to <https://www.toronto.ca/services-payments/venues-facilities-bookings/getting-married/step-1-applying-for-a-marriage-licence/>
- 1. **Two (2) witnesses** are required. Must be **18 years of age with valid ID.**
- 2. **Weddings are limited to a maximum of 10 persons** (including couple, witnesses)
- 3. **MASKS ARE MANDATORY at all times during the service and inside the house.**
- 4. **The following is NOT PERMITTED:**
  - (a) Throwing flower petals, rice, strings and or confetti and blowing soap bubbles in or outside on the premises. (Flowers are permitted to be carried and worn by the wedding party and guests.)
  - (b) NO ALCOHOL
  - (c) NO SMOKING IN THE HOUSE (Smoking is allowed outdoors and all cigarette/cigar butts may be disposed of safely in the can provided on the porch.)
  - (d) ACCESS TO SECOND FLOOR (PRIVATE OFFICES)
- 5. Photography and Videos are allowed during the time allotted for the ceremony.

*It is also understood that both applicants agree to accept the terms and conditions set out in this agreement*

**Name(Print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*I authorize the employees of JSWHF (Applewood) to photograph me and my spouse for the purpose of publicity and advertising in print or electronically.*