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General Information:

Wedding Date: Venue Name:
Celebrant 1 Name: Celebrant 1 Phone Number:
Celebrant 2 Name: Celebrant 2 Phone Number:

Ceremony Information:

Are we providing?: Ceremony Audio Microphones Livestreaming
Officiant Name: Officiant Phone Number:
Ceremony Location:
Ceremony Notes:

Cocktail Hour Information:

Are we providing?: Music
Cocktail Location:
Cocktail Notes:

Reception Information:

Dances & Traditions?: Introductions First Dance Mother-Son Dance
Father-Daughter Dance Bouquet Toss Garter Toss
Cake Cutting Anniversary Dance Last Dance
Other:

Introductions (Please use phonetic spelling):

Are parents being introduced? Yes No
Parents of the Client 1's Names:
Parents of the Client 2's Names:
Flower Girl's Name:
Ring Bearer's Name:

Wedding Party

(Please use phonetic spelling, and indicate relevant title):

Pair 1: escorted by:
Pair 2: escorted by:
Pair 3: escorted by:
Pair 4: escorted by:
Pair 5: escorted by:
Pair 6: escorted by:
Celebrants introduced as:

Send Off Information:

Are you having a Send Off?: Yes No
Send Off Location:
Send Off Notes:

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