



**CLIENT INFORMATION FORM**

**Client Information**

Name			
Mailing Address		City / State / Zip	
Home Phone		Cell Phone	
Fax Number		Email	
Primary Contact:			
Bride's Mother:	Cell Phone:	Groom's Mother:	Cell Phone:
Bride's Father:	Cell Phone:	Groom's Father:	Cell Phone:
Street Address:		Street Address:	
Home Phone:		Home Phone:	
City, State, Zip		City, State, Zip	
Email Address:		Email Address:	

**Event Information**

Event Date		Ceremony Time:	
Reception Time:		Other Event Time:	
Rehearsal Date:		Rehearsal Time:	
Rehearsal Dinner Time:		Dinner Location:	
Set-Up Time / Start		Set-Up Time / End	
# of Guests		Wedding Package Chosen	A B <u>and</u> C D E F G H
Building Chosen		Outdoor Space	
Wedding Ceremony Location		Wedding Reception Location	
Wedding Ceremony & Reception Fee		Wedding or Reception Only Fee	
Rehearsal Dinner Fee:		Total Fees:	
50% Deposit		Received on Date	

**Vendor / Provider Information**

<b>Provider Type</b>	<b>Company / Contact Name</b>	<b>Cell &amp; Business Phone Numbers</b>	<b>Time of Arrival &amp; Pick-Up Items</b>
Event Planner / Representative			Arrive: Return:
Caterer			Arrive: Return:
Bartender			Arrive: Return:
Bakery			Arrive: Return:
Entertainment			Arrive: Return:
Florist			Arrive: Return:
Officiate			Arrive: Return:
Photographer			Arrive: Return:
Rental Equipment Co.			Arrive: Return:
Transportation Service			Arrive: Return:
Other Provider			Arrive: Return: