

# Wedding Information Form



\_\_\_\_\_  
TODAY'S DATE

\_\_\_\_\_  
WEDDING DATE

\_\_\_\_\_  
TIME

\_\_\_\_\_  
REHEARSAL DATE

\_\_\_\_\_  
TIME

INDIVIDUAL INFO

\_\_\_\_\_  
NAME

Gender (circle): MALE FEMALE \_\_\_\_\_  
# IN WEDDING PARTY

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
PHONE TYPE

\_\_\_\_\_  
STREET

\_\_\_\_\_  
ALTERNATE PHONE

\_\_\_\_\_  
PHONE TYPE

\_\_\_\_\_  
CITY, STATE, ZIP

\_\_\_\_\_  
BEST TIME TO CALL

\_\_\_\_\_  
OCCUPATION

\_\_\_\_\_  
DATE OF BIRTH

Previously married? (circle) YES NO

Do you have children? (circle) YES NO

INDIVIDUAL INFO

\_\_\_\_\_  
NAME

Gender (circle): MALE FEMALE \_\_\_\_\_  
# IN WEDDING PARTY

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
PHONE TYPE

\_\_\_\_\_  
STREET

\_\_\_\_\_  
ALTERNATE PHONE

\_\_\_\_\_  
PHONE TYPE

\_\_\_\_\_  
CITY, STATE, ZIP

\_\_\_\_\_  
BEST TIME TO CALL

\_\_\_\_\_  
OCCUPATION

\_\_\_\_\_  
DATE OF BIRTH

Previously married? (circle) YES NO

Do you have children? (circle) YES NO

\_\_\_\_\_  
STREET ADDRESS AFTER WEDDING (IF DIFFERENT FROM ABOVE)

\_\_\_\_\_  
CITY, STATE, ZIP

Flower girl? (circle) YES NO

Ring bearer? (circle) YES NO

\_\_\_\_\_  
DEPOSIT

\_\_\_\_\_  
CHECK NO

\_\_\_\_\_  
BALANCE DUE