

FLOWERS FOR THE WEDDING OF...

This form must be filled out prior to consultation

Bride: _____ Groom: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Wedding Date & Time: _____ # of Guests _____

Location of Wedding: _____

Location of Reception: _____

BRIDAL FLOWERS:

Dress Color & Style _____

Bouquet Style _____

Flowers for Bouquet _____

\$ _____

BRIDE'S ATTENDANTS: Honor Attendants _____ \$ _____ ea Bridesmaids _____ \$ _____ ea

Junior Bridesmaids _____ \$ _____ ea

Dress Color & Style _____

Bouquet Style _____

Flowers for Bouquets _____

CORSAGES:

Mother of Bride _____ Color of Dress _____ \$ _____

Mother of Groom _____ Color of Dress _____ \$ _____

Grandmothers (Number Attending) _____ \$ _____ each

Attendants: \$ _____ each

Guest Book _____ Gifts _____ Cake _____ Punch _____

Vocal _____ Piano _____ Organ _____ Reader _____

Personal Attendant _____ Clergy _____ Other _____

BOUTONNIERES: _____ \$ _____ each

Groom _____ Best Man _____ Groomsmen _____

Ringbearer _____ Fathers _____ Grandfathers _____

Vocal _____ Reader _____ Clergy _____

Others _____

CEREMONY:

Candelabra _____ \$ _____

Arrangements _____ \$ _____

Kneeling Bench _____ \$ _____ Aisle Runner Length _____ \$ _____

Aisle Decorations _____

\$ _____

RECEPTION: Cake Top _____ \$ _____ Base _____ \$ _____

Bride's Cake Table _____ \$ _____

Groom's Cake Table _____ \$ _____ Centerpieces (Number) _____ \$ _____