

 **RECEPTION INFORMATION SHEET**

RECEPTION SITE

Address: _____

Site Coordinator: _____ Phone: _____

Confirmed Date: _____ Time: _____ To: _____

Room Reserved: _____

Deposit Amount: _____ Date Due: _____

Balance Amount: _____ Date Due: _____

Cancellation Policy: _____

Last Date to Give Final Head Count: _____

NUMBER OF GUESTS	Invited	Confirmed
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TYPE OF RECEPTION	<input type="checkbox"/> Sit-Down	<input type="checkbox"/> Buffet	<input type="checkbox"/> Cocktails/Hor d'oeuvres
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CATERER *(When different from reception site)* _____

Contact Person: _____ Phone: _____

Confirmed Date/time: _____ Last Date for Final Head Count: _____

RECEPTION COST

Cost Per Person: Food _____ Beverage _____ **Total** _____

Number of Confirmed Guests: _____

Cost Per Person: _____

(Number of Guests x Cost Per Person) Subtotal: _____

Sales tax: _____

Gratuity: _____

(Site or Equipment) Rental fee: _____

Other: _____

Total Cost _____

Less Deposit: _____

Balance Due _____



CEREMONY WORDING AND IDEAS WORKSHEET

Prelude:

Processional (participants order):

Welcome or Call to Worship:

Readings or Prayer:

Music (optional):

Wedding Meditation (additional comments on marriage, optional):

Declaration of Consent (directed to bride's father, or both sets of parents):

Readings or Prayer (optional):

Introduction to the Vows:

Bride's Vows:

Groom's Vows:

Affirmation by Guests:

Exchange of Rings:

Blessing of the Rings (optional):

Pronouncement of the Union:

Music (optional):

Recognition of the Children (see chapter on Second Marriages for ideas, optional):

Prayer of Hope or Lord's Prayer (optional):



CEREMONY MUSIC INFORMATION

CEREMONY MUSICIANS SELECTED

Ceremony Location: _____

Contact Person: _____ Phone: _____

Wedding Date: _____ Arrival Time: _____

Appropriate Dress: _____

Rehearsal Date: _____ Time: _____ Location: _____

INSTRUMENTALISTS	<i>Phone</i>	<i>Fee</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SOLOISTS	<i>Phone</i>	<i>Fee</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Cancellation Policy		Total Cost
_____		_____
_____		Deposit Paid
_____		_____
		Balance Due

CEREMONY MUSIC SELECTIONS

Prelude: _____ During Ceremony: _____

First Solo: _____ Recessional: _____

Second Solo: _____ Postlude: _____

Processional: _____ Notes: _____



EQUIPMENT CHECKLIST

RENTAL COMPANY _____ Date Ordered: _____

Address: _____

Contact Person: _____ Phone: _____

Delivery Date/Time: _____ / _____ Pick-up Date/Time: _____ / _____

Cancellation Policy: _____ Damaged/Broken Policy: _____

Item	Quantity	Cost
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Item	Quantity	Cost
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CEREMONY EQUIPMENT

Aisle Runner (length) _____

Aisle Stanchions _____

Aisle Candelabra
Free-standing _____

Clamp Style _____

Altar Candelabra _____

No. of Lights _____

No. of Lights _____

Candles _____

Size _____

Candle Lighter _____

Canopy/Chuppah _____

Flower Stands _____

Style _____ Size _____

Style _____ Size _____

Guest Book Stand _____

Kneeling Bench _____

Lattice Backdrops _____

Lattice Arch _____

Microphone _____

Other _____

CHAIRS

Style _____

TABLES

Round Tables _____

36" seats 4 people _____

48" seats 6 people _____

60" seats 8 people _____

72" seats 10 - 12 people _____

Oblong Tables _____

6' seats 6 - 8 people _____

8' seats 8 - 10 people _____

Square tables _____

34" square _____

LINENS

Round Cloths—Color _____

60" fits 24"- 36" table _____

72" fits 24" to floor or _____

36"- 48" table _____

90" fits 36" to floor or _____

48"- 60" table _____

100" fits 48" to floor or _____

60"- 72" table _____

Long Cloth _____

54" x 54" fits cardtable _____

60" x 60" fits cardtable _____

60" x 120" fits 6' and 8' tables _____

NAPKINS

Cocktail Size _____

Dinner Size Paper Cloth _____

Color



EQUIPMENT CHECKLIST

Item	Quantity	Cost	Item	Quantity	Cost
DINNERWARE <input type="checkbox"/> China <input type="checkbox"/> Paper			TRAYS <input type="checkbox"/> Stainless <input type="checkbox"/> Silverplate		
Dinner Plates	_____	_____	Round 12"	_____	_____
Salad Plates	_____	_____	Round 14"	_____	_____
Bread Plates	_____	_____	Round 16"	_____	_____
Luncheon Plates	_____	_____	Round 20"	_____	_____
Soup Bowls	_____	_____	Oval 13" x 21"	_____	_____
Cake Plates	_____	_____	Oval 15" x 24"	_____	_____
Coffee Cups/Saucers	_____	_____	Oblong 10" x 17"	_____	_____
Demitasse Cups/Saucers	_____	_____	Oblong 14" x 22"	_____	_____
FLATWARE <input type="checkbox"/> Stainless <input type="checkbox"/> Silverplate			Oblong 17" x 23"	_____	_____
Dinner Knives	_____	_____	Meat Platters	_____	_____
Steak Knives	_____	_____	Waiters' Trays/Stand	_____	_____
Butter Knives	_____	_____	SERVING PIECES		
Dinner Forks	_____	_____	Chafing dish, 2 qt.	_____	_____
Salad Forks	_____	_____	Chafing dish, 4 qt.	_____	_____
Dessert Forks	_____	_____	Chafing dish, 8 qt.	_____	_____
Teaspoons	_____	_____	Bowls, 12"	_____	_____
Soup Spoons	_____	_____	Bowls, 16"	_____	_____
Demitasse Spoons	_____	_____	Bowls, 20"	_____	_____
Serving Spoons	_____	_____	Punch Fountain, 3 gal.	_____	_____
Meat Forks	_____	_____	Punch Fountain, 7 gal.	_____	_____
Cake Knife/Server	_____	_____	Punch Bowl, ladle	_____	_____
GLASSWARE <input type="checkbox"/> Glass <input type="checkbox"/> Plastic			Coffee Maker, 35 cup	_____	_____
Wine glasses	_____	_____	Coffee Maker, 50 cup	_____	_____
Champagne glasses	_____	_____	Coffee Maker, 100 cup	_____	_____
Water goblets	_____	_____	Silver Coffee and Tea Set	_____	_____
Highballs	_____	_____	Insulated Coffee Pitcher	_____	_____
Double rocks	_____	_____	Creamer & Sugar Set	_____	_____
Snifters	_____	_____	Sugar Tongs	_____	_____
Water glasses	_____	_____	Salt & Pepper Set	_____	_____
Punch cups	_____	_____	Water Pitchers	_____	_____
			Ashtrays	_____	_____
			Table Candles	_____	_____

 **WEDDING DAY TRANSPORTATION**

TRANSPORTATION TO CEREMONY SITE

<i>Name</i>	<i>Pick-up Time</i>	<i>Pick-up Location</i>	<i>Vehicle/Driver</i>
Bride	_____	_____	_____
Bride's Father	_____	_____	_____
Bride's Mother	_____	_____	_____
Bridal Attendants	_____	_____	_____
Groom	_____	_____	_____
Groom's Attendants	_____	_____	_____
Groom's Parents	_____	_____	_____
Grandparents	_____	_____	_____
Other Guests	_____	_____	_____

TRANSPORTATION TO RECEPTION SITE

<i>Name</i>	<i>Pick-up Time</i>	<i>Pick-up Location</i>	<i>Vehicle/Driver</i>
Bride and Groom	_____	_____	_____
Bridal Attendants	_____	_____	_____
Groom's Attendants	_____	_____	_____
Bride's Parents	_____	_____	_____
Groom's Parents	_____	_____	_____
Grandparents	_____	_____	_____
Other Guests	_____	_____	_____
	_____	_____	_____

TRANSPORTATION FROM RECEPTION SITE, TO HOTEL, HOME, ETC.

<i>Name</i>	<i>Pick-up Time</i>	<i>Pick-up Location</i>	<i>Vehicle/Driver</i>
Bride and Groom	_____	_____	_____
Bridal Attendants	_____	_____	_____
Groom's Attendants	_____	_____	_____
Bride's Parents	_____	_____	_____
Groom's Parents	_____	_____	_____
Grandparents	_____	_____	_____
Other Guests	_____	_____	_____
	_____	_____	_____



WEDDING DAY CHECKLIST

BRIDE

GROOM

<i>Items</i>	<i>Packed</i>
Written Vows or Poem to Be	<input type="checkbox"/>
Presented Wedding Gown	<input type="checkbox"/>
Veil and Headpiece	<input type="checkbox"/>
Additional Headpiece for Reception	<input type="checkbox"/>
Special Bra, Panties	<input type="checkbox"/>
Special Slip	<input type="checkbox"/>
Extra Hosiery	<input type="checkbox"/>
Shoes	<input type="checkbox"/>
Gloves	<input type="checkbox"/>
Jewelry	<input type="checkbox"/>
Make-up, Perfume	<input type="checkbox"/>
Nail Polish and File	<input type="checkbox"/>
Curling Iron, Curlers	<input type="checkbox"/>
Comb, Brush	<input type="checkbox"/>
Hairspray, Extra Bobby Pins	<input type="checkbox"/>
Mirror	<input type="checkbox"/>
Toothbrush, Toothpaste, Breath Mints	<input type="checkbox"/>
Iron or Steamer	<input type="checkbox"/>
Garter	<input type="checkbox"/>
Penny or Sixpence	<input type="checkbox"/>
Bible, Handkerchief, Etc.	<input type="checkbox"/>
Ring Pillow	<input type="checkbox"/>
Flower Basket (If not being delivered by florist)	<input type="checkbox"/>
Going-away Outfit	<input type="checkbox"/>
Going-away Undergarments	<input type="checkbox"/>
Going-away Shoes and Hosiery	<input type="checkbox"/>
Accessories, Etc.	<input type="checkbox"/>
Wedding Night Bag (Placed in getaway car)	<input type="checkbox"/>
Honeymoon Suitcases (Placed in getaway car)	<input type="checkbox"/>

<i>Items</i>	<i>Packed</i>
Written Vows or Poem to Be Read	<input type="checkbox"/>
Coat	<input type="checkbox"/>
Trousers	<input type="checkbox"/>
Shirt	<input type="checkbox"/>
Vest or Cummerbund	<input type="checkbox"/>
Shoes	<input type="checkbox"/>
Socks	<input type="checkbox"/>
Suspenders	<input type="checkbox"/>
Tie	<input type="checkbox"/>
Ascot	<input type="checkbox"/>
Studs and Cuff Links	<input type="checkbox"/>
Handkerchief	<input type="checkbox"/>
Underwear	<input type="checkbox"/>
Hat	<input type="checkbox"/>
Gloves	<input type="checkbox"/>
Toiletries	<input type="checkbox"/>
Money	<input type="checkbox"/>
Credit Cards	<input type="checkbox"/>
Other	<input type="checkbox"/>
Going-away Clothes:	<input type="checkbox"/>
Jacket	<input type="checkbox"/>
Slacks	<input type="checkbox"/>
Shirt	<input type="checkbox"/>
Belt	<input type="checkbox"/>
Tie	<input type="checkbox"/>
Shoes, Socks	<input type="checkbox"/>
Accessories	<input type="checkbox"/>
Honeymoon Itinerary, Tickets, Etc.	<input type="checkbox"/>
Wedding Night Bag (Placed in getaway car)	<input type="checkbox"/>
Honeymoon Suitcases (Placed in getaway car)	<input type="checkbox"/>



BRIDE'S NAME AND ADDRESS CHANGE WORKSHEET

Items to Be Changed	Change Name	Change Address	Account or Policy Number, Other Information	Phone or Address to Notify Company	Done
Social Security	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Driver's License	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Car Registration	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Voter's Registration	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Passport	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Employee Records	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
School Records	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Checking Accounts	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Savings Accounts	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
IRA Accounts	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Safety Deposit Box	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Stocks and Bonds	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Loans	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Wills/Trusts	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Pensions	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Property Titles	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Leases	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Subscriptions	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Club Memberships	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Post Office	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Auto Insurance	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Property Insurance	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Medical Insurance	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Doctors/Dentist	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Business Cards	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Business Stationery	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Utilities	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Taxes	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
Credit Cards:	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>



NAME AND ADDRESS CHANGE FORM LETTER

To Whom It May Concern:

This letter is to inform you of our recent marriage and our change of address.

The account/policy number to be changed is:

Currently under the name of: _____

Social Security Number (where applicable) _____

PREVIOUS INFORMATION

Husband's Name

Wife's Name

Husband's Previous Address

Wife's Previous Address

City State Zip

City State Zip

Phone

Phone

NEW INFORMATION

Husband's Name:

Wife's Name:

Husband's New Address:

Wife's New Address:

City: State: Zip:

City: State: Zip:

Phone:

Phone:

Social Security # (when applicable)

Social Security # (when applicable)

As of this date _____

please change the following:

Change Name

Change Address and Phone

Add Spouse's Name

Special Instructions:

Please send any additional forms or requirements to facilitate these changes. If you have any questions, please contact us!

Sincerely,

Husband's signature

Wife's signature

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