

| Name                            |   | Room                 |
|---------------------------------|---|----------------------|
| Date                            |   |                      |
| Arrival time of Bridal pa       | rty   |                      |
| (Max 2 hours prior to start tin | ne)   | Amount of guest      |
| Arrival time of Bride and       | d Groom   |                      |
| Special request upon Arrival:   |   |                      |
|                                 | must work with maitre de on time)<br>annot be during event start times) |                      |
| Place Cards O                   | r Seating Board   | Special Instructions |
| Mirror (Self Stand)             |   |                      |
| Toasting Glasses                |   |                      |
| Menu Cards                      |   |                      |
| Favors                          |   |                      |
| Cake Topper                     |   |                      |
| Sign Book                       |   |                      |

(Please attach certificate of insurance for all your vendors)

You must bring copy of invite with the form.