

LOGO

COMPANY NAME

Tel:

Email:

Web:

WEDDING PHOTOGRAPHY BOOKING FORM

Wedding Date

Wedding Service Location

Time of Service

Approx. Number of guests

**Brides
Full Name**

Grooms Full Name

Address

Address

Postcode

Postcode

Phone

Phone

Email

Email

Reception Venue Name

Reception Venue Address

Reception Venue Tel No.

Start Time of reception

Tick the options below which you will require. If you know the presentation style that you require, then please indicate these.

Bride Preparation

☐

Reception

☐

Ceremony

☐

First Dance

☐

**Name of person making the
booking**

Role in the wedding

Signed

Date