

As You Like It Weddings
Ceremony Reservation Form

Wedding Date: _____ Wedding Time: _____

Reserve Rehearsal Coordination

Services? _____ Yes _____ No If yes, Date & Time: _____

Reserve P.A. System Rental: _____ Yes _____ No

Wedding Location/ Facility: _____

Facility Street Address: _____

Facility City, State, Zip: _____

Facility Phone: _____

Couple's Names: _____

Contact Address: _____

Contact City, State, Zip: _____

Email Address: _____

Primary Phone: _____

Secondary Phone: _____

Special Requests: _____

(male/female minister, incorporating children, religious/non-religious ceremony, example of special rituals, sand ceremony, unity candle, hand ritual, special theme or colors, etc.)

How did you hear about us? _____

How would you like to be introduced at the end of your ceremony? _____

(e.g. Mr. & Mrs. Smith) _____

Please print this form, fill it out and mail it with a \$100 non-refundable deposit to:

As You Like It Weddings
1120 Spruce Avenue
Chico, CA 95926