

Wedding Questionnaire

Groom's Full Name: _____

Bride's Full Name: _____

Groom's Mailing Address: _____

Bride's Mailing Address: _____

Groom's Phone Number: _____

Bride's Phone Number: _____

Fax Number: _____

If you are coming from out of town, where will you be staying?

Number(s) where you can be reached locally: _____

Your Rehearsal Information:

Date: _____

Time: _____

Location: _____

Your Wedding Information:

Date: _____

Time: _____

Location: _____

Wedding Ceremony Information:

Bride's Party Information

Maid of Honor: _____

Bridesmaids: _____

Groom's Party Information

Best Man: _____

Groomsmen: _____

Family Information

Bride's Parents: _____

Groom's Parents: _____

Bride's Grandparents: _____

Groom's Grandparents: _____

Other Family: _____

Special Requests: _____

Please fax or mail back to Calvary Chapel Vail Valley.

Calvary Chapel Vail Valley

PO Box 933

Vail, CO 81658

Fax (970) 748-1234