

VENDORS

WEDDING OF _____

Music: _____ # of vendors _____
Additional Items: _____
Live Musician? Y N (If yes, circle what time: Ceremony Cocktail Reception)
Ceremony Music? Y N Contact: _____
Insurance? Y n/a Preferred Phone #: _____

Limousine: _____
Bride Drop Off _____ Groom Drop Off _____
Contact: _____
Insurance? Y n/a Preferred Phone #: _____

Photography: _____ # of vendors _____
Arrival Time: _____ Videography _____
Drone _____
Contact: _____
Insurance? Y n/a Preferred Phone #: _____

Florist: _____
Additional Items: _____
Number of Tables: _____ Contact: _____
Insurance? Y n/a Preferred Phone #: _____

Cake: _____ Additional Items: _____
Contact: _____ Phone #: _____

Officiant: _____
Contact Phone Number: _____ Arrival Time: _____

Other: _____