

Pre-Consultation Wedding Questionnaire

Please complete the following questionnaire prior to our meeting so that we can provide you with our best selections and recommendations. We look forward to working with you!

Privacy: Your email address will not be traded, sold, or used for any other purposes other than to contact you regarding your wedding details.

Bold items are required.

Wedding Date: _____ (mm/dd/yy)

Brides' Name: _____ **Bride's Phone:** _____

Bride's Address _____ **Contact Email:** _____

City _____ **State** _____

Zip _____ **Groom's Name** _____

Ceremony Location _____ **Ceremony City** _____

Reception Location _____ **Reception City** _____

Bride's Favorite Flowers _____ **Bride's Favorite Colors** _____

Number of Bridemaids _____ **Color of Dresses** _____

Approximate number of guests attending _____

_____ I know exactly what flowers I want for my wedding.

_____ I have some flower ideas, but need some suggestions.

_____ I am clueless about flowers!

How did you hear about us? _____ Yellow Pages
_____ Family/Friend's Referral
_____ Facility Referral (Church, Reception, etc)
_____ Website
_____ Existing Customer
_____ Other Advertising

Submit Wedding Questionnaire Clear Form