

LOCATOR

Please print clearly and provide whatever information you know at this time. Unknown information may be called in at a later date.

Event date _____
Approximate guest count _____
Total number in bridal party _____
Select: Full mass Ceremony only
Photographer _____
Videographer _____
Entertainment _____
Formal pictures at church? yes no
Other location _____
Receiving line at church? yes no
Honeymoon location _____

First dance song title _____

Bride/parent/family dance? yes no
Groom/parent/family dance? yes no
Bouquet toss? yes no
Garter toss? yes no
Garter placement? yes no
Novelty, specialty, or cultural dances or events?

Emergency phone number where you can be reached on the day of the event:

Please list all other information, questions, and comments on the back of this form. Thank you.

Why did you choose T.R. Laz?
 Price Saw ad
 Referral Like what they do
 Reputation Other

T.R. Laz
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Albany NY 12205

Bride _____ Birthday _____
Address _____
Phone: Home _____ Work _____ Cell _____
Email _____ Occupation _____

Groom _____ Birthday _____
Address _____
Phone: Home _____ Work _____ Cell _____
Email _____ Occupation _____

Ceremony Location _____ Time _____
Officiate _____ Phone _____
Address and directions (from Albany) _____

Reception Location _____ Time _____
Manager _____ Phone _____
Address and directions (from Albany) _____

Bride's Prep Location: If you have selected this option, please list address (with directions from Albany), phone, etc., on the back of this form.