



Bayside
FLORAL DESIGN

A Division of Bayside Garden Center

Information for Wedding Consultation

Contacts & Information

Bride Name: _____ Groom Name: _____

Address: _____

Email Address: _____

Phone: (H) _____ (W) _____ (C) _____

Wedding Date: _____ Number of people attending: _____

Ceremony Location: _____

Venue Coordinator: _____ Phone: _____

Time of Ceremony: _____ Time of pre-ceremony photos: _____

Reception Location: _____

Venue Coordinator: _____ Phone: _____

Number of: bridesmaids _____ groomsmen _____ ushers _____ flower girls _____

Color of bridal gown: _____ and bridesmaids gowns: _____

Color of linens for reception: head table _____ guest tables _____

Essential flowers: _____

How would you describe your overall style or theme (i.e. traditional, chic, contemporary) _____

At your consultation we will explore more details and preferences. This form is designed to make the best use of your time at the consultation and allow our designer to prepare for the meeting. Please fax this form to us at: 414-434-0383 or send to: 333 W. Brown Deer Road, Bayside, WI 53217