CLIENTS FORM

We will appreciate if you can take time out to complete this form.

|  |  |  |  |
| --- | --- | --- | --- |
| Title: |  | First name |  |
| Last name |  | Birthday |  |
| Telephone |  | Address |  |
| company |  | Email address |  |
| City/ state |  | Fax |  |

ABOUT YOUR EVENT

1. Kindly Tick the type of Event you want us to plan for you.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bridal shower |  | Engagement |  | Wedding |  |

1. What is (are) the dates of your event?

3. Is (are) the dates flexible? Yes or No)

4. What is the overall estimated Budget?

5 . What is the theme for the event? Classy.

6. What is your colour for the day?

7. What is the venue for your event?.

8. Is the venue already contracted?

9. What is the number of expected guests?

1O. Do you have any information on church?

11 . What is the time for church?

12. How did you hear about ZURIEL events?

13. Kindly Tick the following services, your request to be provided by ZURIEL Events

|  |  |
| --- | --- |
| Full service event and Management |  |
| Provision of Hosts and Hostesses |  |
| Events Designs |  |
| Event Consultation |  |

BASIC INFORMATION

|  |  |  |
| --- | --- | --- |
|  | BRIDE'S DETAILS | GROOM'S DETAILS |
| FIRST NAME |  |  |
| LAST NAME |  |  |
| BIRTHDAY |  |  |
| E\MAIL ADD |  |  |
| BB PIN |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

BRIDE PARENT DETAILS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | FATHER | | MOTHER | |
| FIRST NAME |  | |  | |
| LAST NAME | |  | |  |
| TEL NUMBER | |  | |  |
| EMAIL | |  | |  |
| BB PIN | |  | |  |

GROOM PARENT DETAILS

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | FATHER | MOTHER |
| FIRST NAME |  |  |
| LAST NAME |  |  |
| TEL NUMBER |  |  |
| EMAIL |  |  |
| BB PIN |  |  |

ADDITIONAL COMMENT

|  |
| --- |
| BRIDE'S SISTER |
| GROOM'S SISTER |

Thanks for taking out time to complete this information sheet.

I , The Client hereby confirm that the above information is correct and has been agreed upon.

Client's Signature. Zuriel Events

Client's Name Name

Date Date