



Registration Form

Today's Date: _____
Bride's Name: _____ Wedding Date: _____
Address: _____ Home Phone: _____
_____ Cell Phone: _____
City, State, Zip: _____
Email: _____ Grooms Name: _____
Date of _____ Location of _____
Deployment: _____ Deployment: _____

Location of Wedding: Church Garden Resort Hotel
 Other _____ Time of Wedding: _____
How many bridesmaids: _____ Color Scheme: _____
Price Range: _____

Have you shopped anywhere else? _____ Where: _____
What styles do you Like? _____

What styles have you tried on?

Do you need Tuxedos? _____ How Many? _____
How did you hear about us? Internet Website
 Magazine Email Manufacturer Bridal Expo
 Drive By Friend Relative Yellow Pages
 Other: _____

Please bring with you deployment papers, identification and registration form. Please fax registration form to 714-373-8466, or call to make an appointment. Event Dates July 13, 14, 15, 16 2010.