

Date of Wedding / Celebration

Time

Your full name

address

Partner's full name

address
(if different)

Home telephone numbers

Work telephone numbers

Mobile telephone numbers

Is photographer required at your address?

Time required

Email addresses

Package

Cost

Deposit: £400

2nd payment: £
due 7 days prior to wedding date

Name & address of Church/Synagogue/Registry/Venue

No.of guests

Reception address

No.of evening guests

Best Man or Best Woman

No.of Ushers

Bridesmaids / Ushers

No.of Bridesmaids

Your Father

Mother

Brothers

Sisters

Family

Who is to give you away?

Your partner's Father

Mother

Brothers

Sisters

Family

Date of return from honeymoon?

Dress code: Suit / Black tie

Address to send proofs:

We / I the undersigned, have read the terms and conditions form of this contract and agree to them. Furthermore we have no objections* to **timfisherphotography** using any resultant celebration pictures for **tfp** self promotion e.g. magazine articles and the website. (* delete if you object)

We wish to book (please specify) as the photographer for our Celebration.
(* delete if you object)

Signed

Signed

Dated

Dated

timfisher

46 Cross Road, Bushey, Herts, WD19 4DQ

01923 - 33 33 73