



# REGISTRATION FORM

BRIDE'S LAST NAME: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_

WEDDING DATE/WEAR DATE: \_\_\_\_\_

LOCATION: { AT THE OLD PIN SHOP } 1900 WATERTOWN AVE. OAKVILLE CT 06779  
CONTACT: PHONE: 860-274-1988 | FAX: 203-286-1071 | EMAIL: WEDDINGEMBASSY@GMAIL.COM  
HOURS: TUES. AND THURS. 12:00 P.M. - 8:00 P.M. | WED. AND FRI. 10:00 A.M. - 6:00 P.M. | SAT. 10:00 A.M. - 3:00 P.M.

Name: \_\_\_\_\_ Did you purchase your gown at WE? \_\_\_\_\_

Address: \_\_\_\_\_  
STREET TOWN ZIPCODE

Email: \_\_\_\_\_ Number of Attendants: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

PLEASE FILL IN THE NAMES AND EMAILS FOR YOUR ATTENDANTS - WE'LL FILL OUT THE REST!  
IF THE DETAILS OF YOUR ORDER CHANGE (NUMBER OF BRIDESMAIDS, STYLE OF GOWNS) IT IS YOUR RESPONSIBILITY TO UPDATE THE WEDDING EMBASSY. THANK YOU!

## Wedding Party:

GOWN DESIGNER: \_\_\_\_\_

SPECIFIED HEM LENGTH: \_\_\_\_\_

NAME	EMAIL	STYLE	GOWN COLOR / TRIM COLOR	SIZE	EXTRA LENGTH	SHIPPING?	ORDER COMPLETE (DATE)
MAID OF HONOR							
MAID OF HONOR							
BRIDESMAIDS:							
BRIDESMAIDS:							
BRIDESMAIDS:							
BRIDESMAIDS:							
BRIDESMAIDS:							
BRIDESMAIDS:							
JUNIOR BRIDESMAID:							
JUNIOR BRIDESMAID:							

{Wedding Embassy Use}

COST: \_\_\_\_\_ { MINUS } DISCOUNT: - \_\_\_\_\_ { PLUS } 6.35% TAX: + \_\_\_\_\_ TOTAL: \_\_\_\_\_ REQUIRED DEPOSIT: \_\_\_\_\_ ORDER DUE DATE: \_\_\_\_\_

ALL GOWNS AND MERCHANDISE ARE SENT TO THE WEDDING EMBASSY AND CAN BE PICKED UP AT THE SHOP. BRIDESMAIDS THAT LIVE OUTSIDE OF THE LOCAL AREA CAN HAVE THEIR DRESSES SHIPPED FOR A FLAT RATE OF \$25. ALL ORDERS WILL BE CHARGED A 6.35% CT SALES TAX.