



EVENT QUESTIONNAIRE

Event Date: _____ Budget: _____ No. of Guests: _____

Venue and Address: _____

Start Time: _____ Type of Event: _____

Name of contact person: _____ Phone #: _____

Email Address: _____ Mailing Address: _____

Position: _____

Theme: _____ Colors: _____

Preferred flower(s): _____

Please share any pictures you may have of your vision.

Event layout request: _____

Cocktail Hour: Yes: _____ No: _____ Bar: Yes _____ No _____

Head table: Yes _____ No _____ # at head table: _____

Table for gifts and or awards: Yes _____ No _____ # of tables: _____

Please explain if other: _____

Reserved tables? Yes _____ No _____ #. of reserved tables _____

who are the reserved tables for? _____

Bar setup: Yes _____ No _____ How many bars: _____

TABLES:

Round tables: Yes _____ Long tables: Yes _____ Mixture of long and round tables: Yes _____

Head table: Yes _____ # of people: _____ Reserved tables: _____ # of people: _____

Other: _____

Cocktail/High tables: _____ how many? _____

Cake table: Yes _____ No _____ Treat table: Yes _____ No _____ Food Buffet tables: Yes _____ bNo _____

CHAIRS:

_____ White garden folding chairs Covered: _____ Color: _____

_____ Mahogany brown folding chairs

_____ Clear/Ghost chairs

_____ Chestnut wooden cross back chairs

_____ White wash cross back chairs

_____ Bamboo folding chairs

_____ Gold chiavari chairs

_____ Silver chiavari chairs

_____ Black chiavari chairs

_____ Chiavari mahogany cocktail chairs/high chairs

_____ Lounge chairs

_____ Specialty chairs for honored guest

SERVICES/VENDORS:

Coordinator: Yes _____ No _____ If you have a coordinator, please provide:

Name: _____ Tel: _____ Email: _____

Do you want us to coordinate your event? _____ Yes

Do you need a Celebration cake? Yes _____ No _____ Sweets table: Yes _____ No _____

If you have a baker, please provide

Baker/Celebration Cake: Yes _____ Sweets table: Yes _____

Tel: _____ Email: _____

Do you need a photographer? Yes _____ No _____

If you have a Photographer, please provide: Name: _____

Tel: _____ Email: _____

Do you need a videographer? Yes _____ No _____

If you have a Videographer, please provide: Name: _____

Tel: _____ Email: _____

Do you need a Caterer? Yes _____ No _____ Appetizers: Yes _____ No _____ Dinner: Yes _____
No _____ Dessert: Yes _____ No _____

If you have a caterer, please provide:

Name: _____ Tel: _____ Email: _____

Servers: Yes _____ No _____ Bartender: Yes _____ No _____

DJ/Sound technician? Yes _____ No _____

If you have a DJ, please provide:

Name: _____

Tel: _____ Email: _____

Live entertainment? Yes _____ No _____ Performer: _____

Tel: _____ Email: _____

Would you like Entertainment? Yes _____ No _____ Fire Dancers: Yes _____ Moko Jumbies: Yes _____

Live band: Yes _____

If you have entertainers, please provide:

1. Name of entertainer: _____

Type of entertainment: _____

Tel: _____ Email: _____

2. Name of entertainer: _____

Type of entertainment: _____

Tel: _____ Email: _____

Please list any special needs or requests:

1. _____

2. _____

3. _____

4. _____

Comments: _____
