



Eclipse Photographic  
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Matthew Temple House  
Woodhall Spa  
Lincolnshire  
LN10 6ST

Tel : 07778 311914

## WEDDING BOOKING FORM

Name ..... Date of Wedding .....

Name ..... Time of Wedding .....

Couples Home Address .....

Telephone Number ..... Home..... Work

Church .....

Reception .....

No. Of Bridesmaids..... Best Mans Name..... Brides House Yes/No

Brides House, Address .....

Wedding Service ..... Price £..... Deposit Paid £ .....

Amount Due £ ..... Prior to the Wedding .....

Amount Due £ ..... On Delivery/Viewing of the pictures .....

Special Instructions .....

*I have read this booking form and agree to abide by the terms and conditions and that the purpose of the wedding fee paid is to secure our services for a particular time and date and is therefore non returnable in the event of a cancellation on your part.*

Signature ..... Signature.....

Date .....