

QUESTIONNAIRE

Please bring this to the final appointment prior to your wedding.

Your wedding date: _____ Suite or cottage _____

Number of guests invited to the wedding? _____ (Final count needed 14 days in advance)

Ceremony

Chapel or gazebo with chapel back up wedding? _____ Ceremony time: _____

Notary or clergy's name: _____

Organist or other musicians for ceremony : _____

Photographers name: _____

Are you planning to have a receiving line after the service at the ceremony? Yes No

Will you supply an aisle runner? Yes No

Pew bows? Yes No

Florist name: _____ Phone: _____

What flowers are being supplied for the chapel or gazebo ? _____

After the ceremony would you like a decorated golf cart for photos? Yes No

Rehearsal

What time is your rehearsal: _____ Day: _____

Rehearsal Dinner

Will you be having a rehearsal dinner at museum or dockside? Yes No If yes, where? _____

Time: _____ Day: _____ number of people: _____

Who will be paying for the dinner? _____ Phone number: _____

Menu: _____

Cash bar? or Open bar? _____

Reception

Reception location: Water Museum Maine Inn Tent

Center pieces on the tables? Yes No What are they? _____

What are the colors of your wedding? _____

Wedding cake supplier's name: _____ phone: _____

(Please tell them to deliver the cake no earlier than 2-hours before ceremony & bring a cake box for top cake.)

At the Maine Inn, you have the option of the Arbor set up over your cake? Yes No

Any other special request for decorations? _____

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DJ's Name: _____ Contact info: _____

Does the DJ require a table? Yes No

Bar Service Choices - Cash Bar Y - Tickets - Open Bar (Limit _____)

If open bar, who will be paying? _____

Any special request for drinks? _____ What are they? _____

Do you want to use our bird cage? Yes No If not, please provide something for cards.

Will favors be put on the tables? Yes No

Do you have special champagne glasses for the bride and groom? Yes No

Do you prefer white champagne or sparkling cider for the toast? _____

Do you have a cake-cutting knife? Yes No (if not, we have one available for you.)

Do you have a guest book? Yes No or something else? _____

Number of guests seated at the head table? _____ Placement? _____

Are you planning on assigning tables for the guests? Yes No

If not we suggest assigned Family tables in the front

Are you permitting children at the wedding? Yes No (Please assign children to sit with their parents.)

What two types of salad dressing do you prefer? _____

Menu selection: _____

Any Dietary restrictions: _____

Other notes about your wedding: _____

Please bring this questionnaire to the final meeting

Any questions, call Jennifer at 207- 998-4351 or email Jenn@polandspringresort.com