

Flowers and Botanical Design
430 S Union Street
Traverse City, MI 49684
231-946-6460
hibbardsflowers@sbcglobal.net

WEDDING CONTRACT

In order to reserve the wedding date chosen, I understand that a **\$100.00 non-refundable** deposit is required. I also understand that the balance of the wedding flowers is to be **paid in full two weeks prior to the wedding.**

I also agree to **view my finished order the day prior** to the wedding date for final approval. Wedding orders are non-refundable.

I have read the above and agree to these terms and conditions.

Signature: _____

Date: _____

Name _____

Address: _____

Phone/e-mail: _____

Date of Wedding: _____

Designer: _____

Account# _____

Contract Total:\$ _____

Deposit Received:\$ _____ **cash/check/credit card**

Balance:\$ _____