

Date of Event:_____ Ceremony Location: _____ Requested ceremony start and end times:_____

Name of Event (as it appears on your contract): _____ Reservation #: _____

Type of Ceremony (Style I - \$150.00 or Style II - \$500.00):
Style:_____

Payment type: cash, check or credit card (we accept MasterCard, VISA or American Express)_____

Credit Card number: _____ - _____ - _____ - _____ Exp.
Date: _____

I have read and agree to the above terms and conditions. Customer signature/date:

The Catering Wedding Coordinator will contact you to discuss ceremony details.

FOR OFFICE USE ONLY

A fee of _____ (amount paid) has been paid by the above party on _____(date).

Central Reservations/Meeting Services
staff:_____ Date:_____

Approval for Tripp Deck Ceremonies only (fill in the following fields)-

Date Signed Form Received: _____ Date Wedding Coordinator Sent Email Request:

Responses and Comments from
Staff:_____

Union concerns must be presented within three business days after request sent.

Date approved: _____ Wedding Coordinator Initials: _____ Details in
RESS _____(date)

- *If the ceremony request is made via phone, it will not be processed until a signed copy of this form is received in the Central Reservations office.*

Wisconsin Union Central Reservations
800 Langdon Street
Madison, WI 53706
Updated: 2-22-06 jbj