

## Your Wedding Vision Worksheet

Chances are you have some vision of what your wedding will be like. Sit down and fill out this worksheet together (or make a copy for each of you so your answers aren't skewed).

### Describe the event (check all that apply)

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Intimate      | <input type="checkbox"/> Grand       |
| <input type="checkbox"/> Formal        | <input type="checkbox"/> Casual      |
| <input type="checkbox"/> Relaxed       | <input type="checkbox"/> Festive     |
| <input type="checkbox"/> Elegant       | <input type="checkbox"/> Traditional |
| <input type="checkbox"/> Untraditional | <input type="checkbox"/> Ethnic      |
| <input type="checkbox"/> Religious     | <input type="checkbox"/> Theme       |
| <input type="checkbox"/> Over the top  |                                      |

### Locale

- |   |   |
|---|---|
| <input type="checkbox"/> Where you live   | <input type="checkbox"/> Away from home   |
| <input type="checkbox"/> Bride's hometown | <input type="checkbox"/> Groom's hometown |

### Size

- |  |  |
|--|--|
| <input type="checkbox"/> Intimate (<100) | <input type="checkbox"/> Average (100–250) |
| <input type="checkbox"/> Large (250+)    |  |

Approx. # of guests \_\_\_\_\_

### Season

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Spring/Summer | <input type="checkbox"/> Fall/Winter |
|--|--------------------------------------|

### Hour

- |                                  |                                     |
|----------------------------------|-------------------------------------|
| <input type="checkbox"/> Sunrise | <input type="checkbox"/> Evening    |
| <input type="checkbox"/> Midday  | <input type="checkbox"/> Late night |
| <input type="checkbox"/> Sunset  |                                     |

Choices of date: 1st \_\_\_\_/\_\_\_\_/\_\_\_\_ 2nd \_\_\_\_/\_\_\_\_/\_\_\_\_

Choices of time: 1st \_\_\_\_\_ 2nd \_\_\_\_\_

### Palette

- |  |   |
|--|---|
| <input type="checkbox"/> Spring pastels  | <input type="checkbox"/> All white        |
| <input type="checkbox"/> Black and white | <input type="checkbox"/> Rich winter hues |
| <input type="checkbox"/> Citrus hues     | <input type="checkbox"/> Metallic         |

Specific colors: \_\_\_\_\_

### Festivities (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Engagement party   | <input type="checkbox"/> Shower or luncheon  |
| <input type="checkbox"/> Bachelorette party | <input type="checkbox"/> Bachelor party      |
| <input type="checkbox"/> Couple shower      | <input type="checkbox"/> Rehearsal dinner    |
| <input type="checkbox"/> Wedding-eve party  | <input type="checkbox"/> Postreception party |

