

St. Andrews Woman's Club Bridal Showcase

REGISTRATION

WEDDING DATE: Month _____ Day _____ Year _____

BRIDE: Name _____

Street _____ City/State _____ Zip _____

Home Phone _____ Work Phone _____

Email Address: _____

GROOM: Name _____

Street _____ City/State _____ Zip _____

Home Phone _____ Work Phone _____

Email Address: _____

I learned about the Bridal Showcase through: (you may check more than one)

The State Newspaper WIS Television B106 Radio Other
