

Final Cut DVD Productions

Wedding Booking Form

PLEASE COMPLETE IN BLOCK CAPITALS:

The Wedding of _____ & _____

Contact Phone No: _____ E-mail: _____

Home: _____ Work: _____

Address: _____

Date of Wedding: Day _____ Mth _____ Yr _____ Time: _____

Church Name & Address: _____

Celebrant: _____

Reception Name & Address: _____

Address Bride is leaving from: _____

Address Groom is leaving from: _____

Chief Bridesmaid: _____ Best man: _____

Bridesmaid 1: _____ Groomsman 1: _____

Bridesmaid 2: _____ Groomsman 2: _____

Bridesmaid 3: _____ Groomsman 3: _____

Flower girl 1: _____ Pageboy 1: _____

Photographer: _____ No. of Guests: _____

Special Requests (Music, Photos, etc.) _____

Terms of Contract

1. BOOKING DEPOSIT. A booking deposit is charged on signing this contract. This fee is NON refundable.
2. PAYMENT. Payment of the balance of the agreed fee must be made on the day of the event.
3. FORCE MAJEURE. The due performance of this contract is subject to alteration or cancellation by the Videographer owing to ANY cause beyond their control. In the event of failure of the video equipment or ancillary accessories liability shall be LIMITED TO A FULL AND COMPLETE REFUND OF ALL MONIES PAID.
4. CANCELLATION OF CONTRACT. The client may cancel the contract at any time prior to the event by giving WRITTEN notice to the Videographer. However, the amount paid as deposit shall be retained by the Videographer as compensation against loss.
5. SOLE RIGHTS. The Videographer shall be the sole professional videographers at the venue specified. No objections is raised to family Videographers operating at the event, providing due priority is given to the professional Videographer to ensure satisfactory discharge of this contract.
6. COPYRIGHT. By signing of this contract, the client assigns to the videographer the copyright of all video material specified in the schedule. The videographer may use extracts from this for commercial purposes.
7. DVD's may take from 8 to 12 weeks till completion.

Please Indicate which Wedding Package you Require:

1. Silver € _____ 2. Gold € _____ 2. Platinum € _____

Deposit Paid € _____
(Non-Refundable)

Balance € _____
(Due on day)

Signed

(Print Name)

Date

BEFORE SIGNING PLEASE READ TERMS OF CONTRACT OF THIS FORM

-----Office Use Only-----

Total Price: _____ Deposit Paid: _____ Balance: _____
(Non-Refundable) (Due on day)