

The Wedding Specialist

PMB 903
Fax# 808-874-5599

Bridal Registry Form

Name as it appears on the card: _____

Billing address: _____

Phone #: _____

Credit card #: _____

Expiration date: ____ / _____

Security code: _____

Amount of gift: _____

Notes to the bride and groom: _____

I authorize the Wedding Specialist to apply charges in the amount above to the credit card listed on my behalf. The amount indicated will be charged by a wholesale company not sharing the Wedding Specialist name.

Signature: _____

Please print name: _____

Date: _____