

Holm Media Videography Contract

Name(s): _____

Email address: _____ Phone: _____

Mailing Address: _____
(This will be the address your completed product will be mailed to)

Wedding Date: _____ Photographer: _____

Wedding Planner Name: _____ Wedding Planner number: _____

Approx. Guest Count: _____ Wedding Theme/Colours _____

Locations:

Morning prep:

Bride/Groom (circle one) : _____ Time: _____
(This will be Holm Media's Start time)

Second location (If chosing a second filmer:)

Bride/Groom (circle one) : _____ Time: _____
(This will be Holm Media's Start time)

Ceremony Address: _____ Start Time: _____

Reception Address: _____ Start Time: _____

Photo Location(s): (If going off site) _____

Additional Location comments/requests: _____