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CUSTOMER ORDER FORM

BRIDE'S INFORMATION

Bride's Name _____ Today's Date: _____
Wedding Date _____ Number of Bridesmaids _____

YOUR INFORMATION

Name _____ Pick up at Flutter
Street Address _____ Ship to my address (additional cost)
City _____ State _____ Zip _____
Preferred Phone # _____
Email _____
Contact me by: Email Phone
Bride Bridesmaid Flower Girl Other _____

ORDER INFORMATION

Item 1 Style Name/# _____ Description _____
Fabric _____ Color _____
Trim Style / Description _____ Color _____
Dress Size _____ Top Size _____ Skirt Size _____
Accessory Desc. _____ Color _____
Accessory Desc. _____ Color _____
Measurements: Bust _____ Waist _____ Hips _____ Height _____ Usual Size _____
Flower Girl Measurements: Chest _____ Waist _____ Hips _____ Height _____ Waist to Floor _____
Additional Comments

METHOD OF PAYMENT

Name _____
Billing Address _____
City _____ State _____ Zip _____
Check
Cash
Visa Mastercard
Credit Card Number _____
Verification Code (required) _____ Expiration Date _____

FOR STORE USE ONLY

Ordered on _____
Confirmation Date _____
Salesperson _____
Ship Date _____
iCal _____