

# Wedding Checklist and Planner

The dedicated staff here at Hibbing Park Hotel & Suites is committed to doing everything possible to make sure everything runs smoothly on your special day. Use this checklist and planner to help throughout the preparation process. Included are some important items that will enable us to get everything arranged and in order. If you have any questions or concerns, don't hesitate to contact us.

## Contact Information

Name of the Bride-to-be: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of the Groom-to-be: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Wedding Date: \_\_\_\_\_

Name of Bride's Parents: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Groom's Parents: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Colors/Theme for Wedding: \_\_\_\_\_

Location of Ceremony: \_\_\_\_\_

Start Time of Ceremony: \_\_\_\_\_

Start Time of Reception: \_\_\_\_\_

## *Food & Beverage*

Rehearsal Dinner at Hibbing Park Hotel & Suites?  Yes  No

Hors d'oeuvres Served During Cocktail Hour: \_\_\_\_\_

Starter Salad: \_\_\_\_\_

Main Entrée:  Plated  Buffet

Entrée Selections: \_\_\_\_\_

Vegetarian Meals Needed?  Yes  No If so, how many? \_\_\_\_\_

Other Special Dietary Needs?  Yes  No If yes, how many? \_\_\_\_\_

Children's Meals?  Yes  No If yes, how many? \_\_\_\_\_

Wedding Cake/Dessert Table?  Yes  No If so, what option? \_\_\_\_\_

Wine Pour with Dinner?  Yes  No If so, which wine(s)? \_\_\_\_\_

Anyone in Wedding Party Underage?  Yes  No If so, who?

Hosted Bar:  Yes  No

If so, which items hosted:  Bottled Beer  Call Brands  Premium Brands

House Wine  Cordials  Soft Drinks

Other specialty beverages hosted: \_\_\_\_\_

Time frame for hosted bar: \_\_\_\_\_

Cash Bar:  Yes  No If so, what hours? \_\_\_\_\_

## *Event Center Set-up*

Slide Show During Reception?:  Yes  No    What time/frequency? \_\_\_\_\_

Cocktail Hour?  Yes  No Time Frame: \_\_\_\_\_ Required Set-up: \_\_\_\_\_

Gift Table Location: \_\_\_\_\_

Guestbook Table Location: \_\_\_\_\_

Place Card Table Location: \_\_\_\_\_

Punch or Coffee Table Location: \_\_\_\_\_

Cake/Dessert Table Location: \_\_\_\_\_

Dance Floor/DJ Equipment Location: \_\_\_\_\_

Head Table Location: \_\_\_\_\_ Number of Guests: \_\_\_\_\_

Guest Tables:  6/table  8/table How many tables?

Guest Seating:  Assigned  Reserved  Open Seating

Linen/Napkin Color: \_\_\_\_\_ Fold Preference: \_\_\_\_\_

Centerpieces: \_\_\_\_\_

Additional Decorations: \_\_\_\_\_

Favors: \_\_\_\_\_

Welcome Gifts for Overnight Guests?  Yes  No If so, date /time of delivery: \_\_\_\_\_

Shuttle Service Needs:  Yes  No If so, please describe: \_\_\_\_\_

Gift Opening Next Morning:  Yes  No If so, please indicate time frame: \_\_\_\_\_

Security:  Yes  No If yes, in-house? \_\_\_\_\_

## *Timeline of Events*

Vendor Set-up and/ or Delivery Time(s): \_\_\_\_\_

Wedding Party Photos (Time & Location): \_\_\_\_\_

Ceremony (Time & Location): \_\_\_\_\_

Cake Cut Time: \_\_\_\_\_

Time Guests Seated for Dinner: \_\_\_\_\_

Grand March Before Dinner: \_\_\_\_\_

Prayer or Welcome Before Dinner: \_\_\_\_\_

Champagne Toast Before or After Dinner: \_\_\_\_\_

Wine Pour Before or During Dinner: \_\_\_\_\_

Time to Serve Dinner: \_\_\_\_\_

Time Dance Starts: \_\_\_\_\_

Time for Late Night Snack: \_\_\_\_\_

Time Event Concludes: \_\_\_\_\_

# Vendors

## Musician (DJ, Band, etc.)

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Set-up Time: \_\_\_\_\_ Start Time: \_\_\_\_\_

End Time: \_\_\_\_\_

## Photographer

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

## Wedding Cake Supplier

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

## Other Vendors:

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