

Bridal Gown Order Form

589 Mendocino Ave Santa Rosa, CA 95404

Phone: 707-545-5008 Fax: 707-544-3015 E-Mail: info@atouchofclassbridal.com

Event Name:	Event Date:	
I,	authorize - A Touch of Cla	ass Bridal to charge my Visa/MasterCard for the
(Select one) Full Balance [50% deposit in the amount of \$	Credit card information is as follows:
Credit Card Number:		
Expiration Date: _	Three digit	s on signature strip:
Name as it appears on the card	:	
Billing Address:		
City	State	Zip Code
Phone number:	E-mail address:	
Please indicate your measure	ments here:	
Bust (measured arour	nd the fullest part of the bust)	
Waist (narrowest point	t between where your rib cage ends &	before your hip bones begin)
Hip (at the fullest po	int, which means going around the but	ttocks)
	neasurements, using the appropriate size dresses are standard sizing and may need	ze chart of the designer to select your size) I some adjustments to fit your body shape
Height Hollow to H	Hem No Yes (See Atta	
Authorization to order the	following dress:	(Additional Charges Will Apply)
Designer: Sty	/le NumberColor	··:/
SHIPPING:		
•		would like to have the gown shipped directly to
you, please check the appropriat	in the state of California for an additi	onal \$45.00
		0.00. (Note: Shipping to AK and HI are higher)
	for an additional charge of \$25 - \$175	, , ,
I understand, and acknowledge the	ese measurements to be true and I have se	lected the size that best accommodates my measurements. signer. Balances are due within 10 days after your dress
-		made, a refund will be issued minus a \$50 service fee. d in your price. () (New Purchase Only)
	m is recommended when a person is 5'5" is recommended to pull it up from the wait	and under in height or if you are 6 feet tall. If your gown stline. ()
Additional Charges may apply to	sizes 18 and up depending on the design	er. () These can range from \$50 & up.
You, our c	customer, are very important to us. T	hank You! We enjoy serving you!
Signature:		