

HONEYMOON ITINERARY

TRAVEL AGENCY

Address: _____

Agent: _____ Phone: _____

Number of Days: _____ Estimated Cost: _____

Honeymoon Dates: From: _____ To: _____

Honeymoon Destination(s): _____

WEDDING NIGHT

Hotel: _____ Phone: _____

Address: _____

Room Accommodations: _____ Room # _____

Rate: _____ Includes: _____ Reservations: Made Confirmed

TRAVEL RESERVATIONS *(Airline, Ship, Train, Rental Car):*

<i>Departure/Pickup</i>		<i>Carrier/Number:</i>	<i>Phone:</i>	<i>Arrival/Return</i>			<i>Confirmed</i>
<i>Date:</i>	<i>Time:</i>			<i>Rate:</i>	<i>Date:</i>	<i>Time:</i>	
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>

HOTEL RESERVATIONS

Arrival Date: _____ Departure Date: _____ Confirmed

Hotel: _____ Phone: _____

Address: _____

Arrival Date: _____ Departure Date: _____ Confirmed

Hotel: _____ Phone: _____

Address: _____

Arrival Date: _____ Departure Date: _____ Confirmed

Hotel: _____ Phone: _____

Address: _____

HONEYMOON ITINERARY

PAPERS AND DOCUMENTS

<i>Items needed, depending on travel destination</i>	<i>Packed/Have</i>		<i>Need to Get</i>	
	<i>Bride</i>	<i>Groom</i>	<i>Bride</i>	<i>Groom</i>
Driver's License	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Marriage License	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Passports	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Visas	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Copy of Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Inoculations Needed	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Copies of Prescriptions	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Airline Tickets	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

TRAVELER'S CHECKS _____ *Have*

<i>Bank</i>	<i>Phone</i>
Numbers: _____	_____
Numbers: _____	_____

CREDIT CARDS (*Information to be used in the event cards are lost or stolen*):

<i>Card Name</i>	<i>Company/Bank</i>	<i>Account Number</i>	<i>Phone</i>	<i>Bride's</i>	<i>Groom's</i>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

CHECKING ACCOUNT NUMBERS (*In the event checks are lost or stolen*):

<i>Name on Account</i>	<i>Bank</i>	<i>Account Number</i>	<i>Phone</i>	<i>Last Check #</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

DOCTORS (*In case of emergency*):

<i>Doctor's Name</i>	<i>Phone</i>	<i>Allergies, Medical Condition</i>
Bride: _____	_____	_____
Groom: _____	_____	_____