

Volle's Bridal & Boutique Measurement Form

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Mother of the Wedding **Social Occasion** **Bridesmaid** **Flower Girl**

Name _____

Brides' Name _____ Wedding Date _____

Address _____

City _____ State _____ Zip Code _____

Primary Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ Email _____

Vendor # _____ Computer # _____ Manf # _____ Color _____

Consultant _____ Measurements By _____ Date _____

Bust _____ Manufacturer's Size per size chart _____

Waist _____ Manufacturer's Size per size chart _____

Hips _____ Manufacturer's Size per size chart _____

Usual Dress Size _____

Height _____

Manufacturers recommend Extra Length for anyone 5' 9" or taller wearing 2" heels

Extra Length Yes _____ No _____ - Note there is an additional cost for extra length.

Measurements are taken to order the closest standard size. Gowns are not cut to specific measurements. Alterations may be necessary. Size change due to weight loss or gain after the gown has been ordered, will incur extra charges.

I hereby authorize Volle's to order the specific size I have requested. I understand the fit of this size will be my responsibility.

Size Requested _____ Signature _____ Date _____

Bridesmaids dresses are ordered when Volle's has received full payment, signed Measurement forms and Sales receipts from ALL bridesmaids ordering from Volle's to ensure dresses received are from the same dye lot.

Total amount of sale \$ _____ without alteration charge.