

Sweet 16/Mitzvah Formalities

PLEASE PRINT CLEARLY
BLACK PEN ONLY



Event Date _____ Time _____ Location _____

Guest of Honor _____ Occasion _____

Introductions:

Parents No Yes _____ Song Title & Artist _____

Siblings No Yes _____ Song Title & Artist _____

People Walking In: Song Title & Artist _____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Guest of Honor: _____ Esc By: _____

Song Title & Artist: _____

Dance With: Parent _____ Other _____

Song Title & Artist: _____

To Be Done: Beginning of Party After Candle Lighting Other _____

Person(s) Saying Blessing: _____

Person(s) Saying a Speech or Toast: _____

Will There Be A Candle Lighting Ceremony? No Yes (Please See Candle Lighting Sheet)

Mitzvahs: Would You Like To Do A Hora? No Yes

If Yes, Who Would You Like to Put on Chairs? _____

Are You Doing a Montage? No Yes

Special Requests: _____

Party Information

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Event Date _____ Time _____ Occasion _____

Customer Name _____ Location _____

Genre of Music Requested:

- Club/Dance
 Hip Hop
 Reggeaton
 R&B
 50s/60s
 70s
 80s
 90s
 Classic Rock
 Rock/Pop
 Latin
 Caribbean
 Country
 Party Dances

Dance Songs	Slow Songs
	Dinner Songs

Don'ts _____

Special Requests _____

Candle Lighting

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Candle #	Name	Song (Title & Artist)

Additional Information
