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Music Selections

DATE OF AFFAIR:

NAME:

PLEASE TAKE A MOMENT TO LIST SOME OF YOUR FAVORITE SONGS

TITLE	ARTIST
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Would You Like Us To Take Requests From Your Guests: Yes or No

PLEASE RETURN ALL PAPERWORK ONE MONTH PRIOR TO YOUR AFFAIR!

ADDITIONAL INSTRUCTIONS:
