

GUEST LIST



Guest's Name	Address	Phone # and E-mail	Coming?	
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>
* _____	_____	_____	yes <input type="checkbox"/>	no <input type="checkbox"/>

