

## TAILORING & ALTERATIONS APPOINTMENT FORM

**Appointment Date:**

**Appointment Time:**

Client Information	
<b>First Name</b>	<b>Last Name</b>
<b>Phone Number</b>	<b>Email Address</b>

Appointment Information	
<b>Type of Garment to be altered?</b>	<b>Alterations Delivery Date</b>
<b>Please describe the alterations required and any additional information you want to add</b>	

I confirm that the details provided above are accurate to the best of my knowledge. I understand that any changes to the appointment must be communicated at least 24 hours in advance.

**Signature:**

**Date:**