showers

Shower No. 1

Host/Hostess: _____

Phone: _____

Location/Address: _____

Date: _____

Time: _____

Type of Shower: _____

Gift	Giver	Thank You
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐
_____	_____	☐

Shower No. 2

Host/Hostess: _____

Phone: _____

Location/Address: _____

Date: _____

Time: _____

Type of Shower: _____

Gift	Giver	Thank You
		☐
		☐
		☐
		☐
		☐
		☐
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