

## Welcome...

We are so excited that you have chosen our team for your special day!

## The Benefits...

Let us help you customize and personalize a plan to assist you with all your hair and skincare needs. Enjoy our offerings year-round with your choice of manicures and pedicures, facials, waxing services, and massage.

## Securing your date...

To secure your wedding date, we will need to have a completed and signed contract, a credit card number on file, along with a \$175 deposit fee. The deposit is then credited either the day of your trial services or the day of the wedding.)

Services cancelled thirty days prior to the event will be refunded the full deposit amount. Any cancellations made with less than 30 days' notice are subject to payment of services in full.

## Worry Free...

Express Check Out. Simplified for our brides with 2 or more guests. 30 DAYS PRIOR to the wedding date we will send your Statement of Services; everyone's individual total will be calculated along with your final itinerary in a confirmation email. We will even calculate and include the gratuity upon request for in-salon weddings! Please Note: \*We are unable to accept personal checks, but we accept all major credit cards and certified bank checks.

Our pricing for in-salon bridal services:

- Bridal Style \$100 Bridal Practice Style \$75 Bridal Make Up \$75
- Bridal Practice Make-Up \$75 Bridal Guest Event Style \$60 Bridal Guest Make-Up \$60



Our pricing for OFF-SITE bridal services:

- Bridal Style \$125 Bridal Make-Up \$100 Bridal Guest Event Style \$100
  - Bridal Guest Make-Up -\$ 75 OFF SITE Fee \$150.00
    - 20% Gratuity Added on All Services

What date will you say, "I DO"?_	Time: _				
What time do your IN-SALON p					
Off-Site <mark>ONLY</mark> :					
Name of venue where services w					
Address of Venue: AM/F What time do your party's OFF-SITE services need to be <i>completed</i> by? AM/F					
Please remember to take travel time, your church/venue an	first look photos, etc., ind d your photographer to h				
BRIDE'S INFORMATION:					
First Name:	Last Name:				
Street Address:					
City:	State:	Zip Code:			
Birthdate://XXX	XX Contact Number:				
E-mail: Fiancé's First Name:	Last Nar	 ne:			
How would you prefer to be cont					
Would you like a practice for you (*We recommend having service	•				
CONTACT INFORMATION, if othe	r than above:				
Name:	Contac	ct Number:			
E-mail Address:					

What could we do to make your day special a	and more memorable for you?
	Your Photographer's Name:
*Please read and initial:	
the photos from your photog social media! I give MC Salor	our work, and we love to show it off. When you receive grapher, we would love to feature your wedding on our n & Spa permission to use pictures from my wedding to pages. (Of course, you and your photographer will be LS
Please Be Aware	
*All times, designers, make-up artists	and service fees are subject to change.
*The Event Space is a shared area and open to other guests having salon ser	d may host more than one bridal party at one time. It is not rvices.
	nts 30 DAYS in advance via an email including the guest If appointments are not confirmed after receiving the final o cancellation.
	arty guest services will be processed two days before the date number on file, unless another form of payment is requested. e gratuity.
*Off-Site weddings have 20% gratuit bridal party guest services unless and	y added. The credit card we have on file will be charged for all other form of payment is requested.
_	d with possession and consumption of alcohol on studio ssume no responsibility for loss or damage resulting from its c beverages.
Credit Card Information	
Credit Card Number:	
	lling Zip Code: CVV Code:
I have read, understand, and agree to t	he above terms to secure my event date
Bride's Signature:	

♥BRIDE Allg	uest's servic	es nee	d to be <i>COMPLETED</i>	no later than:	AM/PM	
Do you have a prefe				Yes No	First o	r Last?
HAIR SERVICE		No	• Desired Stylist:	1 1 9 9 1 1 1 9		
MAKE-UP SERVIO		No	• Desired Artist:			
THE OF SERVICE	JE:   103	110	- Desired / Weist.			
• Guest 1 Name:				Number:		
E-mail Address:				Mullibel.		
HAIR SERVICE	: Yes	No	• Desired Stylist:			
MAKE-UP SERVICE	+	No	Desired Stylist: Desired Artist:			
MAINE OF SERVIC	JL.   ICS	INO	• Desired Artist.			
• Cuast 2 Name				N I uma la ausu		
• Guest 2 Name: E-mail Address:				Number:		
HAIR SERVICE	: Yes	No	• Dosired Stylists			
MAKE-UP SERVICE		No	<ul><li>Desired Stylist:</li><li>Desired Artist:</li></ul>			
IMAINE-UP SERVIC	JL.   185	INO	▼DESII EU AI LISL.			
				NI I		
• Guest 3 Name:				Number:		
E-mail Address:	. \/	NI-	- D: 1 Ct 1:t-			
HAIR SERVICE		No	Desired Stylist:			
MAKE-UP SERVIO	CE: Yes	No	Desired Artist:			
				T		
• Guest 4 Name:				Number:		
E-mail Address:	T	1	T			
HAIR SERVICE		No	• Desired Stylist:			
MAKE-UP SERVIO	CE: Yes	No	• Desired Artist:			
• Guest 5 Name:				Number:		
E-mail Address:						
HAIR SERVICE	: Yes	No	• Desired Stylist:			
MAKE-UP SERVIO	CE: Yes	No	• Desired Artist:			
• Guest 6 Name:				Number:		
E-mail Address:						
HAIR SERVICE	: Yes	No	• Desired Stylist:			
MAKE-UP SERVIO	CE: Yes	No	• Desired Artist:			
• Guest 7 Name:				Number:		
E-mail Address:						
HAIR SERVICE	: Yes	No	• Desired Stylist:			
MAKE-UP SERVIO		No	• Desired Artist:			
• Guest 8 Name:				Number:		
E-mail Address:						
HAIR SERVICE	: Yes	No	• Desired Stylist:			
MAKE-UP SERVIO		No	• Desired Artist:			
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