

HAIR SOLUTIONS SALON & SPA

WEDDING CONTRACT

Bride's Name:	Groom's Name:
Wedding Date:	
Bride's Best Contact Phone #:	
Bride's Address:	
City: State: Zip:	
Email:	
How did you hear about us?	
Time of Wedding: A.M. / Bridal Party Arrival at Salon: A.M. / Must Depart by:A.M./P.M	A.M / P.M. P.M.
Brides Requested: ▼ Hair Stylist: Make Up Arti	st: Nail Tech:
reserved especially for you, as a courtesy, we requestion days will incur a 50% charge of the reserved service. Your punctual	ding day reservations. Because these services are uire a 7 day cancellation notice. Any cancellations after 7 ces. A no show appointment will unfortunately forfeit the ity is greatly appreciated to provide you and your bridal ill be made to accommodate late arrivals, however there of the able to complete the scheduled services.
Master Card / VISA Number:	-
Exp: / CSV Code #	(3-digits back of card) :
Signature:	Date:
`By signing this contract, you have agreed to all p	olicies, terms & conditions of Hair Solutions Salon & Spa.