



727-240-1435 • 914 N. McMullen Booth Road • Clearwater, FL 33759

BRIDAL AGREEMENT

Please confirm the wedding services, names and numbers of those in your wedding party reservation dates and services. Please complete and return with deposit.

Wedding Information

Wedding Date: _____ Ceremony/Picture time: _____

Time you must leave salon by: _____ Number of guests in your party: _____

Bride's name: _____ Bride's phone number: _____

Bride's mailing address: _____ Bride's email address: _____

Alternate contact name: _____ Alternate contact number: _____

Requirements for bride and her party: _____

Address for On-Site Services:

Please arrive 15 minutes early. Please wear a button-down shirt. Please arrive with dry hair shampooed the day before. Should any party member forego a prearranged service on the date of service, 100% of the charge will apply.

Payment Information

Total amount of service: _____ Total deposit required: _____

Payment type: _____

Credit card information: _____

Credit card type: _____ Billing address: _____

Credit card number: _____

Expiration date (Month/Year): _____

Signature _____ Date _____

Print name _____ Date _____

Two week advanced notice of cancellation is required. Less than two week notice, your credit card will be charged 50% of the cost of service. If cancellation is made within 1 week, your credit card will be charged 100% of the cost of service. We look forward to hosting your wedding party on your special day. Thank you!!