

Bridal CONTRACT

Style House Salon

2206 W Dupont Rd.
Fort Wayne, IN 46818
(260) 750-4247
www.Stylehousefw.com

NAME

ADDRESS

CITY

ST

ZIP

PHONE #1

PHONE #2

WEDDING DATE

WEDDING TIME

IN PARTY

WEDDING LOCATION

PHOTOGRAPHY TIME

PHOTOGRAPHY LOCATION(S)

Services: Hair Nails (*manicure*) Nails (*pedicure*) Makeup

Location of our services:

In Salon Off Site ▼

OFF SITE LOCATION

\$

Number of professionals:

HAIRSTYLISTS

MAKEUP

Package:

\$

PACKAGE PRICE

\$

DEPOSIT

ARRIVAL TIME

ADD'L OFF SITE CHARGE

Additional information:

(Local contact for out-of-town bride, catering information, other services needed, etc.)

I agree to the scheduled appointment times given (attached), and the price listed above. I understand and agree to the deposit of **\$75** of the total package price due at this time to secure appointments. I consent to having the deposit processed. I agree to pay the balance due on the day of the event. I understand that the deposit will not be refunded upon cancellation. I understand that no refund will be given for members of the wedding party who miss their appointment on the day of the event.

SIGNATURE

DATE

SALON

DATE

METHOD OF PAYMENT FOR DEPOSIT

DATE