

Salon Allure Inc

821 Regal Drive

Huntsville, Al 35801

BRIDAL SERVICES CONTRACT

Name: _____

Address: _____

Home Phone: () _____ Cell Phone: () _____

Local contact name and phone (if bride is from out of town):

Wedding Date: _____ Wedding Time: _____

Number in wedding party: _____

Deposit: \$ _____ Type of payment _____

Location for our services: IN SALON OFF SITE

Off-site mileage charge: \$ _____ (please attach driving directions to location)

I, _____, agree to the scheduled appointment times given on the attached intake forms, and the price listed above. I understand and agree to the deposit of \$ _____ the total package price at this time to secure the appointments. I understand that the deposit will not be refunded upon cancellation unless 72 hour notice is given by me. 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: _____