

Salon Soleil 10409 HWY 27 Hayward WI. 54843
Send all contracts to 7748N Thunder Point RD. Hayward, WI. 54843 or email
to salonsoleil@live.com

715-934-2072

Wedding Date: _____
(mm/dd/yr)

Bridal Party Contract

Dear Bride:

Congratulations on your engagement!

We are honored that you have chosen Salon Soleil to be a part of your special day. We require a few things in order to confirm your appointment date and time.

Please be aware that this is a contract that requires a valid credit card to reserve your appointment. A \$100.00 fee is required to "Save the date" This will not be applied to any services and nonrefundable. "On the day of" If one of your party members cancels you will be charged the full amount of services. If cancelation is made within (5) days or less, your credit card will be charged for 50% of the cost of services. "Destination weddings" Mileage will be added to and from \$0.50 per mile. On location will have a 30% gratuity added to services. On location weddings will be hair services only.==

Credit card information:

Visa

MasterCard

Discover

Name on card: _____

Address associated with card: _____

Card #: _____

Ex. Date: _____

3-digit security #: _____

I have read, understand and agree to the terms of this contract. \$100.00 fee payment by credit card is due upon booking salon services for wedding day.

Signature

Date

In order to expedite your booking, please complete the following form. Don't hesitate to contact our wedding coordinator (Terri) at 715-558-2776 if you have any questions. We look forward to working with you.

Bride Information

Brides Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

E-Mail Address: _____

Preferred method/time to contact: _____

Alternative contact name:

Name: _____

Phone: _____

Wedding information

Wedding Date: _____ Time: _____

Wedding Location: _____

Photo Time: _____

Number in Wedding Party booked for salon services: _____

Bridal Services

Bridal Services (circle all that apply):

Practice Up-do

Wedding Make-up

Wedding Up-do

Date of practice Up-do: _____ Time: _____

Date of practice Make-up: _____ Time: _____

Date of wedding Up-do: _____ Time: _____

Members of Wedding Party Exact Services Needed:

First and last name:

Position in Party:

Services:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

What is your preferred time of departure? _____

Are there any special request for this day? _____

REMINDER:

- Be sure all members of the bridal party have clean and dry hair with gel and/or styling product in their hair upon arrival.
- Please remember all accessories (veils,flowers,etc.)
- Please wear button down shirt on the day of the up-dos.
- Please make sure everyone has an idea of how they would like their hair. Pictures are very helpful.
- Please arrive for your services with your entire party on time;

Salon Soleil looks forward to making your Bridal Party look and feel amazing on this special day!!!

Bride: \$75.00 - \$100.00

Bridesmaids: \$65.00 - \$75.00

Bride make-up: \$45.00 – \$50.00

Bridesmaid’s: make-up: \$35.00 –\$45.00

Flower girl: \$45.00 2yr – 5yr. 6yr and up will be charged same as bridesmaids.

Mother of the bride: \$45.00 - \$65.00

Mother of the groom: \$45.00 - \$65.00

Mother of the bride or groom make-up: \$35.00- \$45.00

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