

FIRST IMPRESSIONS HAIR STUDIO BRIDAL CONTRACT

Dear Bride,

Congratulations on your engagement! We are honored that you have chosen First Impressions to be a part of your big day! Please read through the contract and fill in all appropriate areas. Completed forms may be dropped off or mailed to First Impressions, 1009 Egg Harbor Rd. Ste. 111, Sturgeon Bay, WI 54235. Any questions or concerns please call us: (920)743-0953. Thank you!

- Please be aware that this is a contract that requires a valid credit card to reserve your appointments.
- A 50% deposit will need to be held in order to save your date.

• In the event that you need to cancel your appointments, please let us know at least 2 weeks in advance or you will not get your deposit back.

- Final payment is due the day services are rendered.
- A 20% gratuity fee will be added to the final total.
- Please bring all accessories; veils, flowers, crowns, jewels, etc. that you want incorporated into your hair.
- Please wear a button down shirt on the day of the updos.
- Please arrive with clean, dry, product-free hair. A \$15 fee will be applied to hair that needs blow-drying.

• Please arrive with your entire party on time. Please consider clients scheduled after you. If a wedding party is late, the stylists may or may not be able to accommodate the new arrival time. If the scope of the original contract cannot be fulfilled due to client's tardiness, services may be reduced. However, clients are liable for the original total fee.

• Complimentary juice, coffee, and light snacks will be provided on your special day!

NOTE: Any changes to this contract must be done by speaking directly to a representative of First Impressions by phone (920)743-0953 or in person. Texts, emails, and/or voicemails are not satisfactory.

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Bride's Nam	ne:				
Phone:		Email Address:			
Street Addre	ess:				
City:		State:	Zip Code:		
Wedding D	ate:W	Vedding Time:	Salon Departure Time:		
How many	people in your party v	would like services?:_	(Use the back of pg. 3 to list more than 9 people.)		
Are on-site	services needed on yo	ur wedding day? Yes:	No:		
If yes, ceren	nony location:				
What time	would you like our sty	vlists to arrive for on-	site services?:		
Any other t	houghts or special req	uests for in-salon or o	on-site services?		
	NOTE: Travel Fees	start at \$150. Please ca	all for exact price based on location.		

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Please list everyone in your party who would like services.

Services provided are trial updo (\$125), trial makeup (\$85), wedding day updo (\$125), & wedding day makeup (\$85).

t & Last Name:	Position in Party:	Services Desired:	Total Cost:
(Remember to include any a	oplicable travel fees in the total.)	Total Cost of Services Requ	lested:
• •		Fotal Cost of Security Dep	
	-	• 1	
	d Info: Visa Master Card	_	
	d:		
Card#:	Exp. Da	te:3 Digit Code o	n back:
I have read a	Ill the conditions of this contract, a	and Lagree to the 50% depos	it fee
I have feat a	in the conditions of this contract, a	and I agree to the 5070 depos	
Signature	Day	te Deposit D	ato
orginante	Du	n Deposit D	·un