

Wedding Party Form

Please Print

Brides name _____ No. in party _____
Address _____ Time requested _____
_____ Date of Appt. _____
Phone# () _____ Work # () _____ Fax # _____
Contact Person _____ Phone# _____
Brides name change and address _____

** Parties of six or more will require a credit card on hold or a 50% cash deposit. Please give us a 72 hour notice when canceling appointments to avoid being charged for missed appointments.

Please print the names of the wedding party and circle the services needed

1. (Bride) _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____
Trial run date: _____ Special Style Makeup
2. _____ Phone# _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____
3. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____
4. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____
5. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____
6. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____

7. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____

8. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____

9. _____ Phone # _____
Special Style Shampoo/BD Makeup Spa Manicure Vitamineral Pedicure
Facial Massage Other _____

10. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____

11. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____

12. _____ Phone # _____
Special Style Shampoo/BD Makeup Elemental Manicure Elemental Pedicure
Facial Massage Other _____

Name _____

Credit Card _____ # _____

Exp. Date _____

Deposit Amount _____

Please sign _____