

BRIDAL AND SPECIAL EVENT CONTRACT

ADDRESS 45 Broadway	WEDDING DATE	VENUE		
lewport, Rhode Island 12840	STYLISTS MAKEUP ARTISTS			
PHONE 1 (401) 619-1955 Monday-Saturday				
Dcurlupanddyenewportri www.curlupanddyenewport.com	EVENT LOCATION			
	Street			
	City/Town	Zip Code	State	
	CLIENT INFORMATION			
	First Name	Last Name		
	Email Address	Phone Number		
	$Billing\ Address$			
	Street			
	City/Town	Zip Code	State	
	SECONDARY CONTACT Please include secondary contact information	on in the event that you are not reachal	ole the day of your services.	
	First Name	Last Name		
	Fmail Address	Phone Number		

ADDRESS

445 Broadway Newport, Rhode Island 02840

PHONE

+1 (401) 619-1955 Monday-Saturday

@curlupanddyenewportri www.curlupanddyenewport.com

START AND END TIME FOR HAIR + MAKEUP

Start Time		End Time		
Bridal Party Size				
$PRICING\ INFORM$ This section to be filled o	\widehat{ATION} ut by salon representative o	nly		
Number of Hair Services		Number of Makeup Services		
In Salon Hair	Venue Hair	In Salon Makeup	Venue Makeup	
\$ Bride	\$ Bride	\$ Bride	\$ Bride	
\$ Bridal Party (Each)	\$ Bridal Party (Each)	\$ Bridal Party (Each)	\$ Bridal Party (Each)	
\$ Subtotal	\$ Subtotal	\$ Subtotal	\$ Subtotal	
Travel Expense		Additionals		
\$ On Site Flat Fee		\$ Misc. Fee	\$ Extension Fee	
ravel Fee		\$ Holiday Fee	\$ Overtime Fee	
Foll Fee		\$Assistant Fee (Parti	es of 6+)	
arking Fee		\$ Tattoo Cover Up (Per Service)		
\$ Subtotal		\$ Sunday In-Salon Fe	e	
		\$ Subtotal	\$ Gratuity (20%)	
\$		\$		
TOTAL COST		BALANCE DUE		
CLIENT SIGNATURE			DATE	
SALON REPRESENTA	TIVE SIGNATURE		DATE	

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BRIDAL PARTY / GROUP INFORMATION

Please circle the services that will be provided to each member of your group.

	_ Hair	Makeup
Name of Party Member		
Name of Party Member	_ Hair	Makeup
Name of Party Member	Hair	Makeup
	Hair	Makeup
Name of Party Member		
Name of Party Member	_ Hair	Makeup
Name of Party Member	Hair	Makeup
Name of Party Member	_ Hair	Makeup
Name of Party Member	_ Hair	Makeup
ADDITIONAL NOTES		

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ADDRESS 145 Broadway Newport, Rhode Island 12840	CREDIT CARD INFORMATION please note that all credit sales will include a 3% transaction fee			
PHONE -1 (401) 619-1955	Name on Card			
Monday-Saturday	Card Number	Expiration	Security Number	
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www.curlupanddyenewport.com	PAID BY CHECK		Check Number	
	PAID WITH CASH		Receipt Number	
	Remaining Balance Due On:			
	DEPOSIT/PAYMENT TERMS For all of our bridal or special event services, a deposit in the amount of \$500 is due at the time of booking. Your date is not reserved until your deposit is received along with this fully executed contract. Your deposit will go towards the total cost of your services. A gratuity charge of 20% of your total service charge will also be included in your final bill.			
	In signing this contract the signer agrees that they at of the remaining balance, including the total services in this contract. In the event that the final approved p chose not to participate in the outlined services, the	s rendered to each pers party members are not	son outlined present or	

The remaining balance is due in full two weeks prior to the event date.

We charge a single flat fee for all of our services that are requested to take place outside of our salon space.

If any additional services are needed or executed the day of, a seperate invoice will be sent with the amount due.

Payment in the form of cash or check is accepted

CANCELLATION TERMS

You may cancel at any time, however, you will only get back 1/2 of the deposit if you cancel within 90 days of the wedding any time less than 30 days and the deposit is non-refundable. A cancellation is defined as opting out of all of the services entirely.