

Estetica Salon and Spa Bridal Contract

Name: _____ Wedding Day: _____
Phone: _____ Wedding Time: _____
Email: _____
Home Address: _____

Service Details

Arrival Time: _____ Desired Finish Time: _____
of Hair: _____ # of Makeup: _____

Acceptance Of Agreement

Please understand that you are taking full responsibility for your group. If you are in agreement, please promptly sign and return to Estetica Salon & Spa. We will not consider your appointment(s) firm until receipt of the signed agreement.

Signature: _____ Date: _____

Please email your completed contract to esteticabridals@gmail.com . After you email your completed contract please call the salon to put down your deposit. The deposit of your services will only be refunded if you cancel within 30 days of scheduled services.