

Date of Wedding & Salon Reservation:

Time you need to be OUT of salon:

Brides Name:

Phone number:

Address:

Email:

Credit Card number:

Exp. date:

Name on card:

zipcode:

Signature:

Please send this sheet back as soon as possible so we may book your party. Once this is returned, we will book your party and send you confirmation.

Attendants Name, phone number & service:

1) #:

Hair:

Makeup:

Lashes?:

2) #:

Hair:

Makeup:

Lashes?:

3) #:

Hair:

Makeup:

Lashes?:

4) #:

Hair:

Makeup:

Lashes?:

5) #: Hair: Makeup: Lashes?:

6) #: Hair: Makeup: Lashes?:

7) #: Hair: Makeup: Lashes?:

8) #: Hair: Makeup: Lashes?:

9) #: Hair: Makeup: Lashes?:

10) #: Hair: Makeup: Lashes?: