

# MIRAGE

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## HAIR STUDIO

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### **Bridal Contract (off site)**

Bride Name:

Mailing Address:

Email Address:

Contact Numbers:

Date of Event:

Off-Site Location:

Off-Site stylist arrival time:

Total Count for Formal Style (including Bride): \_\_\_\_\_ = \$ \_\_\_\_\_

Total Count for Airbrush Makeup (Including Bride) \_\_\_\_\_ = \$ \_\_\_\_\_

Total Count for Makeup (Including Bride): \_\_\_\_\_ = \$ \_\_\_\_\_

Number of stylists requested: \_\_\_\_\_ = \$ \_\_\_\_\_

15% gratuity: \_\_\_\_\_ = \$ \_\_\_\_\_

Estimate = \$ \_\_\_\_\_

\*Price is subject to change, this is an estimate only

## Deposit Information

In order for Mirage Hair Studio to guarantee your appointment time to be held for your party, we require that a credit card number be on file. No Charges will be made on your CC until services are performed. To avoid being charged any penalties, please make any cancellations prior to 48 hours of scheduled services. Your CC will be charged 100% of the cost of services for a late cancellation. Full payment is due the date of the service in one payment. Gratuities are not included.

Please provide all credit card information below:

Cardholder name:

Visa/ MC Credit Card Number:

Expiration Date:

V-Code:

Card Holder Billing Address:

By signing below, I acknowledge that I am responsible for full payment of services due on the day of event.

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Signature

Date

\*Failure to cancel appointment before 48 hours will result in a charge to the credit card for full payment of services.

7715 N Kings Hwy, Myrtle Beach, SC 29577

phone 843-449-9983 fax 843-692-9283 email [miragehairstudio@gmail.com](mailto:miragehairstudio@gmail.com)

## Name and services of bridesmaids/guests

Example:

Jane Doe

formal style and make up etc.