

ISLAND HAIR & BEAUTY BOOKING FORM

Wedding name _____ Date and ceremony time _____

Wedding Planner _____ Contact number _____

Bride's mobile contact number _____

Accommodation/call-out venue room number _____

Pre wedding day consultation preferred date and time _____

HAIR & MAKE-UP WEDDING DAY APPOINTMENTS

(Yes / No)

Name, wedding day role and contact number	Hair blow dry	Hair-up	Hair length	Makeup	In-room
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

BEAUTY APPOINTMENTS

(Yes / No)

Name, wedding day role and contact number	Full mani 1hr	Express mani 30min	Full pedi 1hr	Express pedi 30min	Shellac	OPI Polish
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Additional comments / special requirements

Hair note: short hair = chin length, medium hair = chin-shoulder length, long hair = below shoulder length

Nails note: shellac = '2 week manicure' with gel polish, OPI = standard polish range including french polish

Date: _____

Please return this form to your Wedding Planner

ISLAND HAIR & BEAUTY PAYMENT AUTHORITY

CLIENT DETAILS

Date _____

Surname _____ First name _____

Email _____ Contact number _____

Mailing address _____

Suburb/City _____ State _____ Postcode _____

Country (if outside Australia) _____

PAYMENT DETAILS

Total _____

Credit card number

Expiry date

/

Name on card _____

Terms and conditions: I agree that I am personally liable for the payment of all charges incurred by the person, company, or any association, listed hereon. I therefore sign below, and agree that if the person, company or association indicated by me as being responsible for payment of the same does not do so, that I will be liable for such payment, in which I authorise such charge to be charged to my credit card details provided. (Please note: personal information collected may be used to provide information you have requested; and to communicate with you effectively).

Signature _____

Please return this form to your Wedding Planner

My signature confirms that I have read, understood and agreed to the above terms and conditions.