

Bridal Agreement



Tel: 813-830-3158

Email : Sammi@shadesofsammi.com

Client Information

Bride Name: _____

Contact Number: _____

E-mail Address: _____

Mailing Address: _____

Wedding Information

Date of Wedding: _____

Start Time: _____

No. of Party for Hair: _____

No. of Party for Makeup: _____

Location: _____

Address: _____

Bride needs to be ready by: _____

Pricing Information

Bride Hair and Makeup: \$140

Wedding Party Hair and Makeup: \$110

Wedding Party Hair only: \$60

Any Flower Girl Service: _____

Travelling Fee: _____

Wedding Party Makeup Only: \$60

Deposit Required: \$100

Total Cost: _____

Balance: _____

Additional Note:

Cancellation Policy:

If for any reason the date is cancelled by the bride, the deposit is non refundable.

All parties agree to hereby accept amounts charged/paid.



I hereby grant SHADES OF SAMMI permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

Bride Signature: _____

Date: _____