



WWW.THE911STYLIST.COM | INFO@THE911STYLIST.COM | OFFICE: 855-998-4247

FAX: 480-287-8258 | P O BOX 391281 Deltona, Florida 32739

Brides Name: _____ Partner's Name: _____

E-Mail: _____ Mobile Phone: _____

Alternate e-mail _____ Alternate Phone number: _____

Home Address:

Your Artist Name: _____ Preferred Method Of Contact: E-Mail____ Phone____ Text____

Wedding Date: _____ Wedding venue: _____

Where Will We Be Meeting you?: _____

Wedding Start Time: _____ What Time You Need To Be Ready By? _____

What time does your bridal party need to be ready by? _____

(If you have a Photographer, please ask them what time)

Trial Date: _____

Can We Use Your Photos For Our Portfolio or Publicity? Yes / No

How Did You Hear About Us?: _____ Do You Have an Event Hashtag #? _____

(If So What is it?)

Vendor Information

We Like to Give Credit Where Credit is Due!

Photographer: _____

Coordinator: _____

DJ/ Entertainment: _____

Video: _____

Florist: _____ Cake: _____

Catering: _____

Dress Designer/ Store: _____

Rentals: _____

Other Vendors We Should Know
about?: _____

PLEASE INITIAL IF YOU AGREE WITH THE FOLLOWING

_____ All our artists are Independent Contractors. Hairstyles & Makeup by Jackie is not responsible for the artist's work. We have the best artists in the industry with impressive portfolios, resumes. Talent, work ethic and professionalism. They are responsible for their own work.

_____ Hairstyles & Makeup by Jackie reserves the right to terminate a contract due to harassment or a client making it difficult for the artist to fulfill their job to the best of their abilities.

_____ The deposit is **NON- REFUNDABLE**. It secures the time contracted based on the services that have been contracted.

_____ The Trial cost is **NON- REFUNDABLE**. This is a service we are providing and our time. We give you 2 hours for the trial. Going over will result in \$100 an hour charge. Please have a few pictures of how you want your hair & makeup to show your artist. Be prepared.

_____ There is a \$25 per hour early morning fee per artist. Every hour before 8am.

_____ There is a 4% fee on all credit card transactions.

_____ Client is responsible for parking fees.

_____ In the event that additional services are necessary, we will provide clients with an estimate prior to commencing such services. Should we determine that additional assistants are needed for the day of the wedding due to factors such as guest count, venue type and/or amount of time required, clients shall be responsible for additional cost of each additional assistant at the rate of two hundred-fifty (\$250) per assistant.

CANCELLATION POLICY

_____ There is a **30 -DAY CANCELLATION PERIOD**. Any services that are contracted and decide to cancel within the 30 days, there is a FULL CHARGE. You may replace the contracted services with other services if needed. Please make sure the parties that are on the contract are committed and will not cancel. If the client wants to completely cancel the contract within 30 days, there will be a full charge of contracted services.

_____ We are on the clock. We have arrived on time and unable to perform the agreed to services at no fault of Hairstyles & Make Up by Jackie (ex: Party arrives late, hotel or lodging issues, bad weather etc. Be advised there will be WAIT RATE of \$100 per hour to be billed in 15-minute increments applied to the final invoice. **PLEASE** make sure everyone is arriving and is prepared on time. We have accommodated the schedule to ensure your party is satisfied. We CAN NOT guarantee top quality results if the agreed to time frame to perform our services is not met.

_____ You may add services if timing and staffing permits.

_____ You will NEVER be without an Artist. If there is an emergency and your artist cannot make it, another artist will be appointed.

_____ Please have every one's hair DRY and ready to go. Washed the day before is preferred. Having to take time to dry hair takes extra time and is an extra service.

_____ Gratuity is NOT included. Please tip your artists. 15%- 20% is the normal tipping rate.

Approved & Authorized by

Client: Signature: _____

Date: _____

Credit Card Authorization
(BALANCE IS DUE 10 DAYS PRIOR TO EVENT)

I _____ authorize Hairstyles & Makeup by Jackie

LLC to charge the following credit card (circle one)

Visa Mastercard American Express Discover

_____ To pay for the deposit \$100 for Wedding Services. (Initial)

_____ To pay _____ for Wedding Services. (Initial)

Wedding Date: _____

Credit Card Number: _____

Expiration Date: _____/_____/_____ Security Code: _____

Billing Address:

Signature of Card Holder: _____

Printed Name of Card Holder: _____ Date: _____

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