



19045 W. Capitol Drive Brookfield, WI 53045 (262) 373-0005  
[WWW.OffBroadwaySalon.com](http://WWW.OffBroadwaySalon.com)

### Wedding Day Agreement

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Date of Wedding: \_\_\_\_\_ Number of People In Your Party: \_\_\_\_\_  
Bridal Party Arrival Time: \_\_\_\_\_ Time Bridal Party Must Be Finished: \_\_\_\_\_

### Bridal Services

(circle all that apply)

Hair	Nails	Make-up	Waxing
(Long Updo, Long Style, Short Style)	(Manicure, Pedicure)	(Yes/No)	(Yes/No)

(to be completed by the salon)

Date of Practice Hairstyle or Updo: \_\_\_\_\_ Time: \_\_\_\_\_  
Date of Practice Make-up: \_\_\_\_\_ Time: \_\_\_\_\_  
Manicure/Pedicure Appointment Day & Time: \_\_\_\_\_  
Waxing Appointment Day & Time: \_\_\_\_\_

### Credit Card Information

(circle one) Visa MasterCard Discover American Express

Name on Card: \_\_\_\_\_  
Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
CSV Code (3 digits back of card): \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Signature of this Contract is binding in all aspects.

**Bridal Party**

Name: \_\_\_\_\_ Child (circle) Yes No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**(circle all that apply)**      **Hair**                      **Nails**                      **Make-up**                      **Waxing**  
(Long Updo, Long Style, Short Style)    (Manicure, Pedicure)                      (Yes/No)                      (Yes/No)

Scheduled Appointment Times: \_\_\_\_\_  
(To Be Completed By Salon)

**Bridal Party**

Name: \_\_\_\_\_ Child (circle) Yes No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**(circle all that apply)**      **Hair**                      **Nails**                      **Make-up**                      **Waxing**  
(Long Updo, Long Style, Short Style)    (Manicure, Pedicure)                      (Yes/No)                      (Yes/No)

Scheduled Appointment Times: \_\_\_\_\_  
(To Be Completed By Salon)

**Bridal Party**

Name: \_\_\_\_\_ Child (circle) Yes No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**(circle all that apply)**      **Hair**                      **Nails**                      **Make-up**                      **Waxing**  
(Long Updo, Long Style, Short Style)    (Manicure, Pedicure)                      (Yes/No)                      (Yes/No)

Scheduled Appointment Times: \_\_\_\_\_  
(To Be Completed By Salon)

**Bridal Party**

Name: \_\_\_\_\_ Child (circle) Yes No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

<b>(circle all that apply)</b>	<b>Hair</b>	<b>Nails</b>	<b>Make-up</b>	<b>Waxing</b>
	(Long Updo, Long Style, Short Style)	(Manicure, Pedicure)	(Yes/No)	(Yes/No)

Scheduled Appointment Times: \_\_\_\_\_  
(To Be Completed By Salon)

**Bridal Party**

Name: \_\_\_\_\_ Child (circle) Yes No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

<b>(circle all that apply)</b>	<b>Hair</b>	<b>Nails</b>	<b>Make-up</b>	<b>Waxing</b>
	(Long Updo, Long Style, Short Style)	(Manicure, Pedicure)	(Yes/No)	(Yes/No)

Scheduled Appointment Times: \_\_\_\_\_  
(To Be Completed By Salon)

**Bridal Party**

Name: \_\_\_\_\_ Child (circle) Yes No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

<b>(circle all that apply)</b>	<b>Hair</b>	<b>Nails</b>	<b>Make-up</b>	<b>Waxing</b>
	(Long Updo, Long Style, Short Style)	(Manicure, Pedicure)	(Yes/No)	(Yes/No)

Scheduled Appointment Times: \_\_\_\_\_  
(To Be Completed By Salon)