



College Avenue
Santa Rosa, Ca 954049
Telephone (707) 538.3969
www.dolcevitasalon-sr.com

Date:

Dear _____.

Thank you for considering Dolce Vita Salon for your wedding day needs. We are honored to share your special day with you and promise that we will do our very best to accommodate you and your bridal party to the best of our abilities. Our goal is to make your day a memorable experience for you!!

Please complete the contract that will be emailed to you after your inquiry. Enter the information required. After we receive your completed contract a member from our bridal team will contact you with a quote.

Again, we are excited to partner with you to make your wedding day special.

Sincerely,

Kimberly Michalik (Owner Dolce Vita Salon) & Bridal Team Members

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Bridal Party Contract

*In order to hold your Bridal Party appointment(s) we will need a credit card number or a personal check for 50% of the bridal party quote. The 50% charge on the credit card or check is non refundable **unless** a thirty day notice of cancellation **per** appointment is given. The full balance will be due 2 weeks of the wedding. Check and/or credit cards are accepted by each stylist and a 20% gratuity will be added to all services. Please fully complete and sign the information following.*

Our Fees:

Every bride has a vision of how she wants to look on her wedding day, whatever style you choose; planning this special look takes careful preparation.

On Site and In Salon Pricing:

Trial for Brides Hair	\$190+
Trial for Brides Make-up	\$190+
Day of Bridal Hair	\$125+
Day of Bridal Make-up	\$125+
Bridal Party Attendants	\$85+ ea.
Bridal Party Makeup	\$85+ ea.
Flower Girl(s)	\$35+ ea.
Mother of the Bride Hair & Make-up	\$125+
Eyes only :	\$50
Lashes only:	\$20

** Traveling fee (per stylist) \$85.00 flat rate within city limits. There is a \$65 per hr. travel time fee (per stylist) that exceeds city limits after 1 hour travel time.*

** An additional 18% gratuity is added to the contracted services. All prices listed are base prices. See stylist for specific pricing.*

Date of Wedding:

Time of Wedding:

Time of Services:

Time you will need exit the salon:

Wedding Site Address:

Name of Bride

*Stylist*_____

*Time of service*_____

*Address*_____

*Phone Number*_____

Service Required

*Total for Services*_____

Bridesmaid

*Stylist*_____

*Address*_____

*Phone Number*_____

*Service(s) Required*_____

*Time of service(s)*_____

*Total for Services \$*_____

Bridesmaid

*Stylist*_____

*Address*_____

*Phone Number*_____

*Service(s) Required*_____

*Time of service(s)*_____

*Total for Services \$*_____

Bridesmaid

*Stylist*_____

Address _____

Phone Number _____

Service(s) Required _____

Time of service(s) _____

Total for Services \$ _____

Bridesmaid

Stylist _____

Address _____

Phone Number _____

Service(s) Required _____

Time of service(s) _____

Total for Services \$ _____

Bridesmaid

Stylist _____

Address _____

Phone Number _____

Service(s) Required _____

Time of service(s) _____

Total for Services \$ _____

Bridesmaid

Stylist _____

Address _____

Phone Number _____

Service(s) Required _____

Time of service(s) _____

Total for Services \$ _____

Total for Bridal Party \$ _____

Deposit \$ _____

I, _____ agree to the conditions of the Bridal Contract with Dolce Vita Salon. I authorize them to use my credit card / personal check for a deposit to hold the date of my wedding party. I understand my credit card or check will be non refundable for 1/2 of the amount if a 30 day cancellation notice is not received per appointment. Any appointment changes after contract has been signed will subject to the stylist's availability.

Check # _____

Credit Card Type _____

_____ exp. date _____

Signature _____ date _____

We appreciate the opportunity to serve you.

We hope to make your visit with us a pleasant one on your special day.