



CLIENT'S NAME:	# of Makeup Services:	# of Hair Services:
EVENT DATE:	Time party needs to be ready by:	
Location (getting ready at):		
NON-REFUNDABLE RETAINER:		
, +	ow to Submit this Form: Email to unveiledsb@gmail.com	
☐ Please charge the retainer to my cred	it card below. (I understand a 4% convenience charg	ge applies, for a total of \$208)
Cre	dit card must be on file to hold date.	
CREDI Credit Card Type: ☐ MasterCard ☐ Visa ☐	IT CARD INFORMATION — REQUIRED ☐ American Express ☐ Discover Card	
Number:	Expiration (mm/yy):	Security Code:
CARDHOLDER INFORMATION		
Name:	Direct Telephone: (
Billing Street Address:	City:S	tate:Zip:
someone from my bridal party adding a service and leavi	card in the case of an emergency, such as a bounced check by sing before paying the stylist. Otherwise the credit card will not e charge applied to any amount charged on my card.	
X Cardholder Signature	Date/	/
Balance is due in full 2 weeks prior to the event date; if par CANCELLATION The retainer is non-refundable. A Cance reserved date – client will owe 50% of service(s) cancelled unpaid client will owe the Cancellation Fee payable to: Jen	by the Artists at the location, the Client agrees to make payme yment is not received by the due date, the card on file will be cellation Fee will apply if Client cancels the event or any services. B.) 14 days prior to the scheduled date – client will owe 100% any Johnson c/o Unveiled. mation provided is correct or to the best of my knowledge:	charged. within: A.) 1 month prior to the
	D	ate / /
	Cell ()	
Instagram Handle:		

Notes: