Hair Architects Salon Independent Contractor Bridal/Special Event Contract

Thank you for choosing us and trusting our team

1.Services & Pricing:

All listed prices are starting rates for in-salon services. On-site services are subject to additional fees: +$5 per hair service within 50 miles, and +$10 per hair service beyond 50 miles. Final pricing will be confirmed based on the number of services and travel distance.

HAIR

Bride Updo/Style — $95+

Hollywood Curls — $150+

Bridesmaid Updo/Style — $95+

Mother of the Bride Updo/Style — $55-$95

Flower Girl (8 & Under) Updo/Style — $45–$65+

MAKEUP

Bride Makeup STANDARD— $70-$85

Bride Makeup AIRBRUSH— $95

Mother of the Bride/Bridesmaids STANDARD —$55- $85

Mother of the Bride/Bridesmaids AIRBRUSH — $95

ADD ON SERVICES

Personal Extensions (Client Owned) — $30

Purchase & Installation of Extensions — Ask stylist

Lash Extensions - $5-$10

18 1st Ave South Buffalo, MN, 55313
763-682-5744

2.Trial Appointment(s):

Bridal trial appointments are not required but are highly recommended to ensure your desired look is achieved for your wedding day.

Trial Pricing (90-minute session each):

Bridal Hair Trial: $95
Bridal Makeup Trial: $70–$85

We recommend scheduling your trial appointment at least 30 days prior to the wedding date. Trials may be scheduled up to two weeks before the wedding, subject to availability.
***The bride is responsible for scheduling all trial appointments.**

Trial Location:
Hair Architects Salon & Buffalo Day Spa
18 1st Ave. S., Buffalo, MN 55313
Phone: 763-682-5744

3.Wedding / Event Day

***T*he bride/client is responsible for any parking fees, tolls, valet charges, and/or hotel accommodations incurred by the stylist/artist at the designated event location.**

To ensure hair and makeup remain intact when changing outfits, button-down, zip-up, or loose-fitting tops are strongly recommended on the day of the event.

In case of emergencies, schedule changes, or questions on the event day, please provide a primary contact person other than the bride.

Day-Of Contact Name: _____
Relationship to Bride/Client: _____
Phone Number: _____

4.Payment & Booking Policy:

A $100 non-refundable deposit is required to secure your wedding/event date. A valid credit card must also be kept on file.
The $100 deposit will be applied toward the final service total.

Final payment is due on the day of the event. Accepted payment methods are cash, Venmo, & credit card only.

5.Cancellation Policy:

*If the client cancels more than 30 days prior to the event date, the client is responsible only for the non-refundable deposit.

*If the client cancels within 30 days of the event date, the client is responsible for 100% of the contracted service total.

All cancellations must be communicated directly to the stylist via phone call or text message. Cancellation is not considered valid until confirmation is received from the stylist.

6.Wedding & Special Event Details

Event Type (Wedding/Special Event): _____

Event Date: _____

Client/Bride Name: _____

Event Location Name: _____

Event Address: _____

Special Event Notes / Details:

7.Service Summary

Total Number of Hair Services (Updos/Styles): _____

Total Number of Makeup Services: _____

Travel Fee: $_____

Mileage Fee: $_____

Other Fees (if applicable): $_____

Agreed Contract Total: $_____

Credit Card Information

Card Type: ☐ Mastercard ☐ VISA ☐ Discover ☐ AMEX

☐ Other: _____

Cardholder Name (as shown on card):

Card Number:

Expiration Date:

CVV:

Cardholder ZIP Code (from credit card billing address):

Credit Card Authorization & Agreement:

By signing below, I, _____ (print name), acknowledge that I have read, understand, and agree to all terms and conditions stated in the above contract.

I grant permission to Hair Architects Salon & Buffalo Day Spa and/or the stylist/artist to use photographs and/or my name for print, website, social media, and marketing purposes.

I authorize Hair Architects Salon & Buffalo Day Spa and/or the stylist/artist to process the credit card on file in the event of cancellations within 30 days of my contracted event date and/or breach of contract.

Client Printed Name: _____

Client Signature: _____

Date: _____

Stylist Agreement

I, _____ (print name), understand and agree to all terms and conditions stated in the above contract and commit to fulfilling the services outlined.

Stylist Printed Name: _____

Stylist Signature: _____

Date: _____