

Happiness
looks exquisite
on you

INNOVATIONS
bridal beauty lounge
Bridal Beauty 2025

Pricing for your Services-
Hair

Bride up or down style with head piece placement \$135

Bridal party up or down style \$110

Short hair blowouts (chin length and above only) \$60

Jr Bridesmaid or Flower Girl \$50-\$65

(please notate age and submit photo for exact pricing)

prices may be higher based on length and thickness of hair as well as intricate details of style

Bridal trials are done within the Salon and are \$95 for the 1st hour, \$35 per 15 minutes thereafter.

Makeup Artistry

Bride flawless high def airbrush combo makeover includes strip lash application \$110

Bridal party airbrush/high def combo or Traditional (Pro select based on skin type or request) makeover \$95

strip lash application additional \$15 per person for bridal party

Makeup trials are done within the Salon are \$95.

-We require a minimum \$500 per Pro contracted for services done off Salon premises

-Location fees outside of the greater Syracuse area are \$45 per hour, per pro for each way of travel time, and .63 per mile per car for off site insurance, gas & car

-\$35 per Pro fee for parties booked on Sundays, Holiday and holiday weekends or prior to an 8am start time

-a \$75 additional fee applies per location change

-gratuuity is appreciated the day of the services or event.

Our professionally trained Stylists, Make-Up Artists and Spa Techs cater specifically to the individuality of each and every guest.

We endeavor to ensure your experience with us is a stress-free, meticulous beauty affair.

Instructions:

Please fill out information below, including each persons name, desired services and detailed information (long, thick, curl hair, excessive shirt or extensions etc). Once received I will make a detailed proposal for your review. Party date secured with a \$250 deposit.

Bride Name:

Date and Time of Event:

In- Salon

On location

(p)

(e)

Location for Bridal beauty services (if not at Salon) ::

Alternate Contact:

Relation:

(P)

(E)

Type of Event:

Estimated desired start time:

Estimated desired finish time:

If wedding are there photos or first look prior to the event? Y N

On last page, please itemize each person's name with desired service. We will need to know more than just "hair and make-up" for each person, please be specific according to the price schedule

Please notate any person with very short, long or thick hair.
Amy has longer thick hair- everyone else had medium length with normal-thin hair

Please notate any special beauty requests:

**please remember to send pictures of flower girls beautypro3627@yahoo.com for exact price quotes

Terms, please initial for acceptance

A \$250 deposit is required at time of booking, dates will not be guaranteed or secured without a deposit. Payment in full is due 28 days prior to the event. We ask that one person be responsible for deposit and final payment. ____

Deposits will be refunded in full if party cancels no later than 90 business days prior to the event. There will be NO REFUND for services that have paid in full within the 28 day time period. There will be no refund for guests who are unable to receive services, a replacement person will be honored ____

Appointments on final schedule are guaranteed by time and may not be able to be fully completed if party is running late. We ask that each person be available for their appointment 10-15 minutes prior to their scheduled time. You will be charged in full for any party member who arrives late and cannot be done. ____

Changes to the contract may be made by yourself or your alternate contact and ONLY with our Event Coordinator. There is no guarantee for time or availability on last minute changes. ____

All up and down styles are done on clean, dry hair. Any washing, blowout and ironing of these styles prior is not recommended, unless contracted during initial consultation and will be charged an additional \$25 per person if this service needs to be done. ____

All make-overs are done on clean skin. If your technician needs to cleanse your skin prior to your scheduled service you will be charged an additional \$15 per occurrence. ____

If balance is not paid in full by 6pm 28 days prior to the event we will assume the event was abandoned. Appointments will be cancelled and the deposit will be forfeited. ____

Arrivals prior to 7am will incur \$25 fee per Stylist or Artist. ____

Please ask each person getting their hair done to arrive with a button down shirt to ensure their final style remains intact during dressing. ____

Pre-scheduled trials DO NOT guarantee Stylists, Artists or dates until deposit is received. ____

Photo Release

I, _____, agree to submit my professional event photos with the use of any of the professional photo images taken on and during my event for INNOVATIONS advertising within 3 weeks of my event. I allow photos from my event to be posted on the INNOVATIONS websites, used in videos and social media pages to promote their makeup & hairstyling services with credits given to my photographer.

Signed _____ Date _____

Upon signing this contact you accept all TERMS without question as stated above.

Guest Signature _____ Date _____

Please submit the signed agreement with your deposit.

We accept Cash or Checks in person only. Credit cards may be taken in person or over the phone. PayPal payments incur an additional 10% fee.

You will receive a copy of this agreement for your records. If paying by check we allow for 10 business days for the check to clear prior to scheduling. Additionally, if you are paying your balance by check please make sure your check is received 35 days prior to the scheduled event.

Please make checks out to Beauty and Wellness Spa at Innovations.

You may email your contract to Jennifer at beautypro3627@yahoo.com

Thank you for choosing
the Beauty and Wellness Spa & Boutique at INNOVATIONS Salon & Spa
to be a part of your special day.

Deposit amount: _____ paid by: _____ received
by: _____ date: _____

FINAL PAYMENT DUE:

Date: _____ Amount: _____

FINAL PAYMENT:

Received by: _____

Date: _____ Amount: _____

Photos submitted:

Y N

Date: _____

