

# BELLA NELLA BRIDE

*hair, makeup & beyond*

## **Thank you for choosing Bella Nella. Please Follow The 5 Step Instructions To Reserve Your Appointment For Hair & Makeup**

**Step 1.** Please download, read, fill out and sign the Deposit Policy

**Step 2.** Return the completed Deposit Policy by:

- Bringing it into the salon personally
- Faxing it to the salon: **818-291-0782**
- Emailing it to us: **bellanella@bellanella.com**
- Please state in the subject: *Deposit Policy, your name, & the date of your occasion.*

*Note: If you do not have a fax machine or scanner, you may send your deposit policy to us by taking a clear picture of it on your smart phone and emailing us with the above email address.*

**Step 3.** During our working hours you will receive a follow up phone call from our bridal coordinator to take your credit card number (Visa or Mastercard) to pay for the deposit and reserve your appointment.

**Step 4.** The credit card transaction receipt needs to be signed and returned to us in order to finalize the appointment processes. Once you receive the receipt for you appointment please sign it and return it to us in the same way you sent in your initial Deposit Policy.

**Step 5.** Thank you for choosing Bella Nella. If you are a bride-to-be you will receive your bridal emails and videos to teach you your bridal beauty do's and dont's. Please click the link sent to your email to give us permission to add you into our bridal emailing list.

*Congratulations!*

*We look forward to making your bridal day a magical experience.*

Tel- 818.291.0781  
www.bellanella.com  
bellanella@bellanella.com  
413 E. Glenoaks Blvd. Unit A Glendale, CA



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EMAIL: bellanella@bellanella.com

FAX: 818-291-0782

Appointment with **BN ARTIST at the Salon:** \_\_\_\_\_

Appointment with **BN ARTIST TRAVEL:** \_\_\_\_\_

Name: \_\_\_\_\_

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

Occasion Date: \_\_\_\_\_

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

**Bride:** \_\_\_ **Engagement** \_\_\_ **Special Occasion** \_\_\_

Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Birthday: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

1. By signing this form, I am fully aware and agree to comply with Bella Nella's **Deposit Policy**. The policy states that NO DEPOSIT is refundable under any circumstances.

2. If an emergency should arise, I understand that I can keep my deposit as a **salon credit**, as long as I cancel 30 days prior to my appointment date.

- *Any services performed before cancellation such as, bridal plans/ consultations will be deducted from the deposit. (Ask front desk for service price)*
- *I understand that I may also choose to transfer my existing deposit towards adding a new or existing person, for any service or purchasing of salon products.*

3. If I cancel my appointment **within the 30 days** prior to my appointment date, I will lose my FULL DEPOSIT as a cancellation fee.

4. **SUNDAY Paid In Full Appointments:** If appointment is paid in full and is cancelled prior to 30 days, the salon will keep a 15% cancellation fee and refund the remaining amount to owner.

- *If I cancel my appointment within the 30 days prior to my appointment date, I will lose 50% of my Paid in Full Deposit as a cancellation fee.*

5. I understand that all prices are subject to change without notice. Furthermore, I am aware that the purpose of this document is only to secure and hold my appointment for hair and makeup on a specific date.

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

Today's Date: \_\_\_\_\_

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