



CESAR LARIOS
— HAIR DESIGNER —

HAIRSTYLING

Contract

Thank you for your interest in my hair services. Please carefully review this contract. I require this contract to be completed and submitted with a non-refundable deposit of \$150.00 in order to secure your event date. The complete balance for your party will be due on or a day before the wedding date. Please feel free to contact me with any questions or concerns you may have.

I look forward to working with you and your party.

Thank you and congratulations!

Client Information

Bride/Quinceanera Name:

Phone:

Address:

Email:

Event Date:

Styling Location:

Styling Start Time:

Styling End Time:

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118 N Fourth Ave, Pasco WA 99301

Services *and* Pricing

	Price	Total
Bride/Quinceanera:	\$	\$
Bridesmaid(s):	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Mother(s):	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Flowergirl(s):	\$	\$
	\$	\$
	\$	\$
Travel Fee:		
	Grand Total:	

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POLICIES

Liability:

The freelance hairstylist shall not be held liable for any allergic reactions, injuries, or adverse effects resulting from the use of hair products or styling tools during the hairstyling session. The client is responsible for informing the hairstylist of any allergies or sensitivities.

Method of Cancellation:

- Cancellation or rescheduling must be made at least 60 days prior to the event date.

BOOKING: To secure a date, a signed bridal contract and **\$150.00 deposit** are required. This deposit is non-refundable and non-transferable. This deposit will be put toward the client's total wedding day balance if the client chooses wedding day services. The remaining balance will be due on or before the day of the event. **Accepted forms of payment include: cash, Venmo, Zelle, ApplePay and CashApp, and all major credit cards with \$7 dollars fee per transaction**. Gratuity is never expected but always appreciated.

Payments:

The final balance is due on or before the day of the event before the hair stylist — no exceptions. The person(s) responsible for the entire balance of payments the person(s) whose name(s) appear on this contract.

DELAYS: A late fee of \$25.00 will be charged for every 30 minutes of delay when a client is late for the scheduled time, or if the scheduled application exceeds the allotted time due to client delays.

Photography:

The client grants permission for the freelance hairstylist to take photographs of the completed hairstyling for their portfolio, website, and promotional materials unless otherwise specified by the client. Any sensitive or private images will not be shared without the client's consent.

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POLICIES

Travel:

I require 5 or more people receiving the service in order to travel. Mileage fee (\$2.00/mile
ROUND TRIP

Client Responsibilities:

The client agrees to:

- Provide a clean and well-lit area for hairstyling at the event location.
- Arrive with clean, dry hair on the day of the appointment, as specified by the hairstylist.
- Communicate any changes in the event details, hairstyles, or preferences with the hairstylist in a timely manner.
- Be punctual and ready for the hairstyling appointment to ensure that the schedule is maintained.

Agreement

By signing below, the client acknowledges that they have read, understood, and agree to the terms and conditions outlined in this hairstyling contract. The freelance hairstylist also agrees to provide the agreed-upon services to the best of their ability.

I, _____, understand and agree to pay the non-refundable security deposit to secure the appointment(s) for my bridal party and myself. I agree to pay the complete balance for my party on the day of the event as listed in this contract on or before my event day.

I understand and will comply with all policies as listed in this contract. I understand that no refunds will be given for members of the party who miss their appointments on the day of the event.

I also understand that I am responsible for balances from any members of my party who fail to provide payment.

Client Signature: _____

Date: _____

Hairstylist Signature: _____

Date: _____

Please retain a copy of this contract for your records.

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