**MAC HAIR STUDIO *& Spa***
**Bridal Party Wedding Services Information**

WEDDING DATE _____ TIME _____ am / pm BRIDE

***INFORMATION***
NAME OF BRIDE _____
ADDRESS _____
CITY _____ STATE ____ ZIP _____
PHONE (___) _____-_____

NAME OF CONTACT PERSON IF NOT BRIDE _____
PHONE (___) _____-_____
☐ SAME AS BRIDE

STUDIO SERVICES REQUESTED: ☐ ON SITE AT MAC HAIR STUDIO *& Spa*
☐ AT VENUE (OR OTHER LOCATION)

***VENUE INFORMATION***
NAME _____
ADDRESS _____
CITY _____ STATE ____ ZIP _____
PHONE (___) _____-_____
*CONTACT PERSON AT VENUE*
NAME _____
PHONE (___) _____-_____

***NUMBER IN BRIDAL PARTY REQUESTING SERVICES (INCLUDING THE BRIDE)***
HAIR ONLY _____
MAKE UP ONLY (TRADITIONAL APPLICATION) _____
MAKE UP ONLY (AIRBRUSH APPLICATION) _____
BOTH HAIR & MAKEUP _____ (TRADITIONAL _____ AIRBRUSH _____)

*PLEASE LIST ANY SPECIAL REQUESTS OR NOTES THAT CAN HELP US PREPARE FOR THE BIG DAY.*

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