



RETAINER AND SERVICE AGREEMENT

First/last Name _____ Date _____

Address _____

Cell# _____ Other _____ Email address _____

Any cancellations or changes to an appointment must be made 7-10 days prior to the scheduled time otherwise the retainer will be forfeited.

WAIVER AND INDEMNITY

I _____ have read, understand and agree to follow the home maintenance instructions and the retainer and service agreement. I understand that in order for ZOYA SALON to guarantee the extension services the four recommended styling and maintenance products must be purchased from ZOYA SALON. I understand that these products must be bought every 8 weeks. I understand that in order for guarantee services any color services to be performed should be performed by ZOYA SALON. I understand that color services are a separate charge. I understand follow up appointments are necessary to insure satisfactory results and wish to proceed with hair extension services.

I understand that any changes to an extension appointment must be made 7-10 days before said appointment. I understand that I will be held responsible for the remaining balance of my extension appointment if I fail to show up for my scheduled appointment or if the appointment is not rescheduled within the given time frame.

I will indemnify and hold harmless of any claims and actions and agree that I will not hold ZOYA SALON and/or any of its employees liable in any way for any loss, damage or injury that may be claimed, suffered or brought against them by any party as consequence of the use of my Hair Extensions. I agree to pay any legal court and/or administrative cost incurred by ZOYA SALON and/or their designers in defense of this agreement. (Initials) _____

Appointment Date/time ____/____/____ @ ____pm/am Total price \$ _____

50% Retainer (NON REFUNDABLE) \$ _____ Balance Due\$ _____

Number of Bundles _____ Length _____ Colors _____

Application method _____

Additional information _____

I give permission to Zoya Salon to photograph and use all before and after pictures. I will not receive any gratuity or fee. (Initials) _____

Signature _____

Date _____