

Function Agreement Form

Submit form by mail or fax (309) 693-9115.

Deposit. A non-refundable, non-transferable \$200 deposit is required for group functions.

- This deposit is owed on the day the services are booked for the future appointment(s).
- This deposit can be used towards the payment of services.

Prices and Promotions. Prices and promotions are subject to change without notice from time of booking the function to the time of receiving services.

Gratuities. A 20% gratuity will be added to all group function services.

Payment Due in Full 1 ½ Weeks Before the Group Function(s).

- All services that are scheduled for the group function(s) are due in full (less the deposit) 1 ½ weeks before the first function date listed on this contract.
- Payment is non-refundable and non-transferable for a different date(s).
- Any appointments associated with the group function will be canceled if payment is not received 1 ½ weeks prior to the first function date listed on this contract.

Credit Card on File. A credit card must be kept on file for group functions. This credit card would be used in the event there would be any incidentals, late arrivals, additional service requests, etc. that may be incurred for anyone associated with the group function.

Cancellations, No-Shows and Confirmations. Service times will be confirmed approximately one week before the scheduled services, and a courtesy call will be made the evening before the scheduled appointments.

Late Arrivals

- It is imperative that any service(s) associated with the group function dates start on time. Our staff must be given an appropriate amount of time for the services that are scheduled for group functions to ensure the best experience for the guest.
- To enjoy the full experience, it is recommended that group functions arrive 15 minutes prior to the service start time. Should any individual arrive late, we may be forced to minimize the service time and the cost will remain the same. A late fee will be applied per person: \$1 per minute, per person. This amount will be due on the day of the late arrival or will be charged to the credit card on file.
- The late arrival policy applies to all group function appointments.
- If anyone associated with the function is 15 minutes or later in checking in, they will risk the possibility of forfeiting the service without a credit or refund.
- The service provider will determine if the service can be performed to the best of our ability within the time frame that is left due to the late arrival.
- Should the service(s) not be able to be performed as scheduled, credits or refunds will not be given for the service (or partial service).

Initial if you understand and agree to the "Late Arrivals" section. _____

Group Contact. To ensure that your function is scheduled correctly and to avoid miscommunication, one group contact must be named. We will not make any changes to the schedule unless we are contacted by the group contact person designated below. The group contact person will be responsible for the following:

- Communicating with all individuals associated with the function.
- Communicating the contract details with anyone associated with the group function(s).
- Communicating start times and services that are being received with each individual that is a part of the group function. Confirmations of the appointments will be made with the group contact only.

Group Contact Name: _____

Initial if you understand and agree to the "Group Contact" section. _____

Appointment Confirmations

- Services and start times will be confirmed approximately 1 week before the scheduled services.
- Any changes or additional service(s) requests are to be communicated at this time by the group contact. Availability is based on the appointment blocks reserved from the original booking.
 - "Payment Due in Full 1 ½ Weeks Before the Group Function(s)" will be calculated based on the appointments to date.
 - Credits or refunds will not be given for any cancellations or no-show appointments.
 - Payment is non-refundable and non-transferable for a different date(s).
- Additional appointments made *after* the confirmation.
 - Appointments made after the confirmation will be subject to availability.
 - Payment for any additional services will be due at the time of booking.
 - Credits or refunds will not be given for any cancellations or no-show appointments.
 - Payment is non-refundable and non-transferable for a different date(s).
- Additional appointments/products on the day of service(s).
 - Appointments are based on availability.
 - Payment for any services/products received on the day of service(s) will be due on the day of service.
 - Credits or refunds will not be given for any cancellations or no-show appointments.
 - Payment is non-refundable and non-transferable for a different date(s).

Initial if you understand and agree to the "Appointment Confirmations" section. _____

Credit/Debit Card Statement. I am satisfied and agree to pay the scheduled/received services, deposit amount, the amount due 1 ½ weeks before the group function(s), payments for any additional appointments made after the confirmation, payments for appointments on the day of the function(s), late arrivals, products, gift certificates, gratuities and any incidentals for anyone associated with the group function(s) and in accordance to the card issuer agreement. I am satisfied with services scheduled/received and agree to pay for these services as well as products, deposits, payments and gift certificates that I have purchased, gratuities and any additional gratuities left at my own discretion. All make-up and gift certificate sales are final. Any other product purchased may be returned (within our return guidelines) for in-store credit only.

Credit Card Type _____ **Name on Card** _____

Number _____ **Exp Date** _____

Signature _____

Initial if you understand and agree to the "Credit/Debit Card Statement" section. _____

Agreement. I hereby acknowledge that I have read the foregoing Group Function Agreement Form in its entirety and that I understand the words and language contained herein. I hereby expressly authorize, consent and permit Five Senses Spa and Salon to charge the credit/debit card provided for any and all incidental charges and/or any unpaid balances associated or incurred by any of the individual(s) in the function identified herein. I understand and agree that by signing this form, I am agreeing to release, indemnify and hold Five Senses Spa and Salon, its owners and employees, harmless from any and all liability, claims or costs, including attorney's fees and court costs, associated with this group and/or individuals.

Interest and Attorney Fees. Any disputed unpaid balances or charges for which payment is withheld shall accrue interest at the rate of 8% per annum. Further, I agree to be responsible for all of Five Senses Spa and Salon's reasonable attorney fees and court costs pertaining to said dispute.

Group Function Date(s) _____

Name _____

Signature _____ **Today's Date** _____