



**Spa Bella Salon & Boutique Deposit Form 2020/2021**

620 Arnold Avenue, Point Pleasant, NJ 08742

Phone: 732-899-2202

Fax: 732-899-5999

Email: [Spabellaappointments@aol.com](mailto:Spabellaappointments@aol.com)

Web: [www.SpaBellaNJ.com](http://www.SpaBellaNJ.com)

**Non- Refundable deposit guaranteeing appointment date, time, and service(s): \$50.00**  
**\*deposit will be applied toward your final payment on day of service.**

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

Time: \_\_\_\_\_

Stylist/Tech: \_\_\_\_\_

**Credit Card Information:** (as of January 1<sup>st</sup> 2020 a 3.99% processing fee will be added to all credit/debit card transactions)

-In order to guarantee your appointment time/service we require the following credit card information:

Credit Card Type (circle):    Visa      MasterCard      Discover      Amex

Credit Card #: \_\_\_\_\_

Expiration Date (Month/Year): \_\_\_\_\_

CVC Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

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

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

No additional charges, **after the deposit**, will be made to your credit card until services are performed. However, we do require 72 hours (3 days) advance notice for any cancellation. In the event that an appointment is cancelled less than 72 hours (3 days) prior to your appointment, you will be held responsible for half (50%) of the total cost of the service(s) and your credit card will be charged.

If you have any questions, concerns, or if we can better serve you in any way, please contact us at (732)899-2202, or email us at [spabellapointpleasant@aol.com](mailto:spabellapointpleasant@aol.com)!

Thank you!  
Kelly Lamicella  
Owner, Spa Bella Salon & Boutique

Spa Bella Staff Verification: \_\_\_\_\_

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