

Tori Rae Salon Client Booking & Cancellation Policy

Hi there! Thank you so much for your interest in booking with me, Tori Ingardia, Owner and Head Stylist of Tori Rae Salon. I can't wait to meet you and get started on your hair journey! My salon is located at:

27742 Vista Del Lago J-3, Suite 118, Mission Viejo CA 92692

My salon is inside of Phenix Salon Suites. When you walk in to the lobby, on your left hand side, there will be a site map that will help direct you to my suite. If there is no one at the front to help you, I am down the hall, on the back row to the left.

Cancellation / No Show Policy

When you book an appointment with me at my salon, you have my 100% guarantee that you and your hair will have my complete attention and I will pour my whole heart into making your hair dreams come true! Hair is not just my livelihood, it is also my passion, and when you leave the salon you can rest assured that your hair will look beautiful!

When booking a 4+ hour appointment with me, I require a 50% upfront deposit to hold the appointment. These appointments require not only more time than the average appointment, but also require more product and more artistic creativity, which comes with a higher price point. As your hair stylist, I have spent countless hours cultivating my techniques and I've personally invested a lot of my time, and money, in outside education/classes to keep up to date with current trends, so I can perfect my craft and offer the highest quality of service possible for you, my guest. I strive for 100% satisfaction and know that doing great hair, and providing you with a relaxing one on one service, in a luxury environment, is the key to success and happiness. I respect your time and your hair goals and I hold both in very high regard. In return, I ask that you respect my time that I have dedicated solely to you. In the event that you need to cancel/reschedule your appointment, I require 72 hours advance notice for full refund of your deposit. Appointment cancellation, or rescheduling, with less than 72 hours notice will result in your upfront deposit being credited toward the full amount of the service at a future appointment. Should a guest **NOT** show up for an appointment and give **NO** advance notice, the deposit will be charged in full and will **NOT** be credited to future appointments upon booking.

Please Note

At Tori Rae Salon, I strive for perfection every time, with every client. Virgin hair, previously colored hair, and especially "box" colored hair done at home, all react differently. I use top of the line, professional hair care and color lines on every guest and I promise, I will do all I can to achieve your desired result in the first session. However, please understand that some hair goals take time, and the health and condition of your hair is my #1 concern. I will do everything I can to reach your inspired

outcome in one appointment, but ultimately, the result of each session is up to your hair. If I feel that the integrity of your hair will be compromised, I will not push the hair and risk damage or breakage. Due to this, please keep in mind that some transformations may require multiple sessions. I will always err on the side of caution to ensure the health and safety of your hair. Thank you in advance for your patience and understanding during this process and I can't wait to meet you and create some beautiful hair together!

Credit Card Authorization Form

I, _____, authorize Tori Rae Salon to charge my credit card for the deposit, on the hair services performed by Tori, on the decided upon appointment date. This deposit is an approximate 50% estimate of the final cost of service and will be charged upfront and credited in full, towards the appointment total. Once payment is received, your appointment will be confirmed and a receipt will be sent to you, via e-mail or text message based on client preference. Thank you!

Credit Card Type: _____

Credit Card #: _____

Card CV2 # (code on back) : _____

Expiration Date: _____

Billing Address: _____

Billing Zip Code: _____

Name (as it appears on card) : _____

Client Signature: _____ **Date:** _____

Client Phone Number: _____

Client Email Address: _____

Please e-mail back a copy to: torirae130@gmail.com with specified preferred form of receipt.

