

STEP TWO: CONTRACT DETAILS (PART I)

EVENT/WEDDING DAY DETAILS

Date of Event: _____

Client Name: _____

Venue/Event Address: _____

Room #: _____ Event/Ceremony start time: _____

Wedding Planner: _____ Phone: _____

Individual responsible for final payment: Self Other — Name: _____

GUESTS/BRIDAL PARTY

What time will the bride/bridal party need to have their hair and makeup completed? _____

Name: _____ Start time: _____ (Bride Bridal Party Guest) | AMT DUE: \$ _____

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Name: _____ Start time: _____ (Bride Bridal Party Guest) | AMT DUE: \$ _____

_____% of the total is due today as a *deposit* to book and guarantee the date above with the makeup artist. The remaining amount will be due on the day of the event.

_____% TOTAL DEPOSIT DUE TODAY: \$

PAYMENT STATUS (CHECK ONE): PAID UNPAID — DUE: _____

STEP TWO: CONTRACT DETAILS CONTINUED (Part 2)

THIS CONTRACT is entered on _____ and is the only agreement between _____, all his/her bridal and/or event guests, members, and **Makeup artist** _____. By signing this agreement, the client understands each statement below applies to client and all his/her party and members booking makeup services. Any claims, charges, and discrepancies will be at the expense and responsibility of individual signing this agreement.

BOOKINGS: To secure a date, a signed contract is required with a ____% deposit of all day-of-event makeup services. The deposit is non-refundable and non-transferable after ____days has elapsed from the date of contract signing unless unforeseen events occur and a full refund is approved by the makeup artist. Please be advised, dates and schedules will only be reserved when a signed contract and deposit are received.

PAYMENT: Final payment for makeup services must be paid in full on the day-of-event once makeup services are performed. The bride or individual responsible for booking the services are responsible for making this payment. If guests or event members are paying for their own makeup services, their payment will need to be given to the person responsible for booking. Please make necessary arrangements as we only accept one total payment for all services that the client and the entire event party have booked.

TRAVEL FEE: A one-way mileage fee of ____ cents per mile will be charged for locations outside of a ____ mile radius of the city.

BOOKING TIMES: The contract will contain a start time and end time approved by the client and makeup artist. Each session requires a certain length of time to be completed and will not exceed the time limit. The makeup artist will give you an estimate on how much time will be needed for each individual. When reserving your date, book accordingly. All persons involved in makeup appointments need to be available at the scheduled time of said appointment in order to not break the contract. All makeup for more than one person must be at the same location and consecutive in time (no gaps in between).

LIABILITY: All brushes and makeup products are kept clean and are sanitized between every session. Products used are hypoallergenic. If a client has any skin condition or product irritation/allergy, it should be reported to the makeup artist prior to the session. If needed, a spot test of makeup may be performed on the skin to test reaction. Client(s) agree to release the makeup artist, its owners, and all employees and agents from liability for any skin complications due to allergic reactions.

DOUBLE BOOKING CLAUSE: Due to potential scheduling conflicts, if any person is not available for an appointed booking time, then his or her makeup session may be cancelled or pushed back (at the sole discretion of the makeup artist) and all deposit monies are non-refunded.

SATISFACTION GUARANTEED: Makeup services will be completed to a client's satisfaction but it is not to exceed the allotted time. Ample time is given for each session upon booking. Acceptance of completed makeup style by client is acknowledgement by client that makeup is done to his / her satisfaction.

PARTIAL SERVICES: The makeup artist will only provide services for booked appointments; we do not offer "partial" or "light" makeup services for free.

CANCELLATION: All deposit monies paid by client will be refunded if contract is cancelled within ____days of contract signing. After the ____ day grace period, should a client cancel the booked event or any service on a contract, the deposit will not be refunded or transferred. If the makeup artist cancels at any time or be unable to perform his/her duties for any reason, the deposit paid will be fully refunded by check within two (2) weeks of the cancelation date. Client agrees that the refund of 100% of the deposit is the only liability to the makeup artist and any and all of its owners, employees, and agents.

CONTACT INFO: If contact cannot be made over remote location cell phone usage problems, wrong numbers are given, or other reasons that the service providers cannot control, tardiness or other issues that may arise from this lack of communication will be the sole responsibility of the client seeking services on this contract.

SERVICE LOCATION AND REQUIREMENTS: The location of makeup services for the day-of-event will be decided by the client. There are certain requirements that need to be provided by the client in order for the makeup artist to complete the makeup service. A "set up" table work area, ample lighting, working electrical outlets, and chair needs to be made available for the makeup artist at said location in order for services to be performed properly.

USE OF IMAGES: The makeup artist/business may use on its websites - and / or in any social media site, brochure, flyer or other advertising it deems necessary - any and all photographs, video, audio, and any other digitally or chemically stored media that is captured or recorded by the makeup artist and any and all of its representatives or agents. Client(s) agree to release any and all claims regarding use of his / her image for such purposes.

PRIVACY STATEMENT: All personal information you have submitted in order to process makeup service requests will not be intentionally sold, shared, or distributed to third parties, except as required by law or government policy

Signing this document will be confirmation of your understanding and agreement of the above statements and that all personal information provided is true, accurate, complete, and current.

CLIENT NAME:

Signature: _____ Date: _____

MAKEUP ARTIST:

Signature: _____ Date: _____

REMAINING AMOUNT DUE ON DAY OF EVENT ____/____/____: \$

PAYMENT STATUS (CHECK ONE): PAID UNPAID – DUE: _____