

Contract

Agreement

I, _____, have contracted, _____, Makeup Artist and/or Hair Stylist to perform professional services on the following date(s): _____

Liability

I understand that the contracted artist/stylist(s) listed above will not be held responsible in the event of any allergic reactions and/or breakouts as a result of their services. I understand that it is my responsibility to inform the artist(s) beforehand of any known allergies to cosmetic products. I also understand that I am ultimately responsible for the decision to proceed with services.

Payment

I am enclosing \$_____ to serve as my deposit to reserve the above date for desired services. I understand that this deposit and remaining balance of services are non-refundable in the event of the cancellation of special events. A deposit of 50% of services booked is required to secure the date of services at the time of signing. Remaining balance is to be paid one month prior to the event. The final balance is due as ONE PAYMENT – no exceptions. The person responsible for the entire balance of payment is the person who has signed the contract. Check or cash is preferred to make deposits and balance payments– if credit card payment is needed for any reason, a 3% service charge will be added. In the event of preparation being at another salon, the bride must confirm with the salon owner and any booth rental fees are to the responsibility of the bride/bridal party not the artist(s).

Cancellation

In the event of a cancellation of services or event, no part of payment or deposit will be refunded and can NOT be transferred to future services. If cancellation is made less than 30 days prior to the wedding date and payment has not been paid in full at time of cancellation, payment is still due to the artist(s). NO EXCEPTIONS. In the unforeseen circumstance artist(s) cannot fulfill obligations to perform scheduled services due to any unforeseen circumstances (dangerous travel/weather conditions, extreme health conditions, etc). I understand that my deposit/ payment will be refunded in full and I will be notified of cancellation as soon as possible.

Bridal Party

When reserving your date, book accordingly. Persons included in the contract are guaranteed services; any extra bookings will be only permitted if time allows. Once services are booked you may NOT subtract from the contract. All persons receiving services MUST be at the location of preparation and ready for services at an agreed time in order to not delay the schedule. If not on time, services are no longer guaranteed. An additional \$30 fee will be required for anyone requiring a blow dry prior to styling.

Artist(s) will arrive at (_____:_____) and depart at (_____:_____).

Bride's Discretion

Any makeup being applied on bridal party, along with hair styles will be discussed and decided on by the artist(s) and bride; not by individual members of the party to keep looks uniform.

Use of Image

Please note all photos taken on event day may be used for portfolio and advertising purposes only. Photos will not be sold or used for any reasons other than ones stated.

Agreement Signatures:

Client sign: _____ Date: _____

Artist(s) sign: _____ Date: _____

For our records:

Total Cost (including travel fee): _____

Deposit: \$ _____ Payment Date: _____ Payment Method: _____

Balance: \$ _____ Payment Date: _____ Payment Method: _____

Address of Prep Day of Wedding: _____

Address of Wedding: _____

Booking Services:

Please fill in blanks with names for members needing services and check off the appropriate services needed for each.

	HAIR	MAKEUP
Bride To Be The one and only: _____	<input type="checkbox"/>	<input type="checkbox"/>
Bridesmaids: 1. _____	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	<input type="checkbox"/>	<input type="checkbox"/>
10. _____	<input type="checkbox"/>	<input type="checkbox"/>
Mother-of-Bride: _____	<input type="checkbox"/>	<input type="checkbox"/>
Mother-of-Groom: _____	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Total Hair Cost: _____

Total Makeup Cost: _____

Travel Fee: _____

GRAND TOTAL: _____

**Payment schedule breakdown on previous page*