

FACEFORWARD

Bridal Agreement for Makeup Application

Makeup Artist: _____

Email: faceforwardweddings@gmail.com

Phone: (832) 489-8813

Website: www.faceforwardweddings.com

Name: _____ Wedding Date: _____

Email: _____ Phone: _____

Location of Makeup Application: _____

***Traveling on location may require a travel charge. If this is the case, please fill in the agreed amount below to be paid in full along with the 30% retainer at time of booking. Bride is also responsible for parking/valet of Makeup Artist(s).

TRIP CHARGE: YES or NO (If yes, \$ _____)

Names of People getting Makeup Application:

#1 _____ #2 _____

#3 _____ #4 _____

#5 _____ #6 _____

#7 _____ #8 _____

#9 _____ #10 _____

#11 _____

#12 _____

#13 _____

#14 _____

Start time: _____ Finish Time: _____ (please leave 30 min for padding)

Traditional makeup: \$100 per person

Airbrush makeup: \$150 per person

The total # of people _____ x \$100 or \$150 (circle 1) = \$ _____

(There is a minimum of 5 people on Saturday and Sunday. In the case of one person in the party deciding against makeup, the full amount will be charged to reach the 5 person minimum.)

In order to reserve the date of your wedding or event, a 30% non-refundable retainer must be paid via cash or card to Andrea Simmons.

TOTAL amount charged for makeup services for wedding day \$ _____

30% retainer collected in order to reserve the date \$ _____

Trip Charge (if any), DUE WITH DEPOSIT \$ _____

REMAINDER DUE the day of event (CASH ONLY PLEASE) \$ _____

DATE SIGNED: _____

Signature of Bride: _____

Printed Name of Bride: _____