MUA LUZ

PROFESSIONAL MODEL APPLICATION FORM

Date: _____

1. Personal Information

- Full Name: _____
- Date of Birth: _____
- Phone: _____
- Email: _____
- City & State: _____

2. Appearance Details (For Makeup Reference)

- Hair Color: _____
- Hair Length: ☐ Short ☐ Medium ☐ Long
- Eye Color: _____
- Skin Tone: ☐ Fair ☐ Light ☐ Medium ☐ Tan ☐ Deep
- Undertone (if known): ☐ Cool ☐ Neutral ☐ Warm
- Lip Shape: ☐ Thin ☐ Medium ☐ Full
- Brow Shape: ☐ Thin ☐ Medium ☐ Full

3. **Experience**

Have you modeled for makeup before? ☐ Yes ☐ No

If yes, please list any brands, artists, or projects: _____

_____

4. Availability

Preferred Days: ☐ Weekdays ☐ Weekends ☐ Both

Preferred Time: ☐ Morning ☐ Afternoon ☐ Evening

Earliest Available Date: _____

5. **Photo Submission**

Please attach clear, current photos taken within the last month:

- Headshot – No Makeup
- Close-Up of Eyes
- Close-Up of Lips
- Side Profile – Left
- Side Profile – Right

(Natural lighting preferred; no filters.)

6. **Declaration**

I certify that the information I have provided is true and correct. I understand that submitting this application does not guarantee selection as a model for MUA LUZ.

SIGNATURES

_____ _____

Signature Date

_____

Printed Name