

website | www.KrystalMakeupArtist.com

email address | Krystal@KrystalMakeupArtist.com

Wedding Makeup Contract

CONTACT
NAME:
PHONE & EMAIL:
MAILING ADDRESS:
WHEN
WEDDING DATE & TIME:
TIME TO BE READY:
W H E R E
WEDDING DAY PREP:
CEREMONY VENUE:
RECEPTION VENUE:
WHO
WEDDING PLANNER:
PHOTOGRAPHER:
VIDEOGRAPHER:

BOOKING

The following is required in order to secure your wedding date:

- \$50 non-refundable deposit. This amount will be applied toward your total balance due. The remainder will be collected on your wedding day.
- This Wedding Makeup Contract must be completed and returned back to Krystal via email.

CANCELLING

If you choose to cancel for any reason, you must do so at least one month prior to your reserved date or you will be responsible to pay the total amount due as agreed upon in this Wedding Makeup Contract.

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D A T C C	
RATES	
Pre-Wedding Makeup Trial Wedding Day Makeup Wedding Party & Guests' Makeup Eye Makeup Only False Lash Only Stay for Touch-ups On-Location Makeup Application within Phoenix and its surrounding cities exceeds 30 miles from Central Phoenix Preferred Method of Payment: Cash	\$150 \$100 \$50 \$50 per hou
APPOINTMENTS	
Please list each name and service requested for those wanting their make	eup done:
TC	DTAL DUE: \$
DEP	OSIT DUE: \$ 50.00
REMAIN	DER DUE: \$
PLEASE NOTE: \$50 deposit will be collected via online payment.	'
A C K N O W L E D G M E N	ΙΤ
I, (print name), have read this contract contents. I agree to the following: • I will comply with the booking and cancellation policies. • The Pre-Wedding Makeup Trial is to be paid in full at the trial appointmen. • The complete balance is due for my wedding party and I on my weddin. • I am responsible to pay the balance due for anyone who fails to provide. • I give Krystal permission to use my wedding photos and/or videos solely f. Professional Makeup Artist.	in its entirety and I fully understand its at. g date. payment.
(e)SIGNATURE:	DATE: