



Client Consent and Knowledge of Service Form

If the Client is under the age of 18, a legal parent or guardian must sign on behalf of the client.

I _____ (Client) have agreed to receive makeup services from _____ (Artist) on _____ for the price of _____. I agree to pay a deposit of _____ upon scheduling any services. This is a one time agreement.

By agreeing to the provided services, I allow the Artist to do makeup on my face and/or body. I am aware of the aspects and possible risks that come with using makeup and having my makeup done by the Artist. I understand that this will include the Artist using their personal makeup products on my skin as well as my own products when agreed upon. I am aware that the risks include but are not limited to skin irritation or infection due to used products or products containing possible allergens and irritants, makeup coming into contact with my nose, eyes, and mouth which may cause irritation and the spreading of germs. I understand that in order to receive the service, the Artist will need to come into close contact with my face and body. I will not hold the Artist liable for any damages including damages to my face, body, or personal property. I will not hold the Artist responsible for any personal injury or damages. (Examples include but are not limited to a mascara wand poking the eye, makeup spilling on clothing or furniture, infections and irritation, etc).

I have been advised by the Artist to take proper precautions in advance to avoid any potential risk involving allergies or known skin irritants. I will disclose any known allergies or products to refrain from using in the matter of health and safety. The Artist will use single use, disposable makeup tools when available. The Artist has taken the

appropriate measures to ensure proper sanitation of all tools and products that will be used during my session.

I agree to pay any deposits within 24 hours of scheduling of any services. I agree to pay for any services in person, before the Artist and Client part ways. I agree to pay 50% of my remaining balance if I cancel up to 7 days before my service or if my service is canceled due to safety concerns, disruptive behavior, inability to pay the day of my service. I have read and understand all policies outlined in the services guide related to fees, payments, and cancellations and I agree to follow the terms.

I understand that I will not be refunded if I am dissatisfied with my completed service. I agree to communicate with my artist throughout my session to avoid this outcome.

I understand that the Artist is not a licensed cosmetologist nor a licensed esthetician. I acknowledge that the recommendations and advice of the Artist are not to be taken in lieu of medical advice. I will not hold the Artist responsible for any recommendations or advice taken.

I have read and understand the services guide in its entirety and have asked any questions I needed prior to signing this document. I understand that the services guide is an extension of this contract and I must have read it in its entirety to be eligible for services. I will not hold the Artist liable for any damages or misinformation should I neglect the services guide. I understand that failure to read the services guide is a breach of this contract on my part, and failure to read said material can result in a cancellation of my services. I agree to any terms and policies stated in the services guide.

I understand that this is a one time agreement and that if I should decide to receive services in the future, it is not guaranteed that I will receive the same rates as the service that I am receiving today. The Artist reserves the right to reschedule or refuse service at any time for any reason. The Artist reserves the right to disclose reasons for reschedule or refusal of service at their own discretion.

I understand that any breach of this contract, including the terms and policies in the services guide, is cause for cancellation of my service and possible legal action.

For Clients hosting their session at their residence or location of their event only:

I agree to host the Artist at my residence or location of my event. I agree to keep any pets either in a kennel, on a leash, or in a separate room from the time the Artist arrives until the time the Artist has left the premises. I agree to keep any children in a separate room or under appropriate supervision (someone other than myself) from the time the Artist arrives until the time the Artist has left the premises. I understand that one or multiple disruptions from pets or children are the cause for my service to be stopped.

I agree to provide a table, chair, and white light source for the Artist or communicate that one will need to be provided within 24 hours of my service.

I agree to provide a safe working environment for the Artist. I will not intentionally subject the Artist to physical harm during my session.

For Clients visiting the Ezra Fae Beauty home studio only:

I agree to travel to the residence of the Artist to receive my services. I agree that should I bring a guest, I may only bring one guest. I understand that my guest must be at least 18 years old. I agree that I am responsible for my guest while at the residence of the Artist. Should myself or my guest damage the residence or belongings of the Artist or individuals who live at the residence of the Artist, I agree to pay for the damages. I understand that my guest may be asked to leave if they are disruptive. Should I choose to leave with my guest, I will still be expected to pay for my service in full, regardless of completion. I agree to all policies outlined in the service regarding having my session at the residence of the Artist.

For Clients under the age of 18 only:

The parent or legal guardian of the client agrees to sign this document on behalf of the client. The parent or legal guardian acknowledges that the client is 13 or older and that lying about age or guardianship is a fraudulent act and a breach of the contract. The Artist will not be held responsible in any way including damages, injury, or payments received if the adult signing on the behalf of the client is not the parent or legal guardian. The parent or legal guardian of the client agrees to remain present for the entirety of all sessions. The parent or legal guardian will be responsible for scheduling services and making payments. The Artist will not perform any services without consent from both the client and the parent or legal guardian.

Ezra Fae Beauty reserves the right to request proof of age or guardianship such as a birth certificate or government ID.

Optional- I consent to be added to the Ezra Fae Beauty email list.

Client Name (Printed)_____

Client Signature _____

Client Phone Number _____

Client Address _____

Artist Name (Printed)_____

Artist Signature_____

(If Applicable) Home Studio Address

Service Date _____

Billing Statement

Consultation fee	
Travel/ Mileage charge	
Price of makeup application	
False lash application	
Additional charges	
Total	

Deposit of _____ received on _____

* optional* I agree to have my pictures from my service uploaded to social media and website for exclusively promotional purposes and for the Artist's professional portfolio.

Client signature _____

Client name printed _____