

Makeup Service Contract



Thank your for your interest in TiffanyToniMUA makeup services. Please carefully review this contract in its entirety and upon acceptance of each stipulation within the contract, please initial and/or sign where stated. It is required that the contract is completed and returned along with a non-refundable deposit (see deposit amount below) **within 72 hours of receiving the contract**, and the remaining balance is due on the date of service via cash, CashApp, Paypal ,or Chase QuickPay. Please feel free to contact me with any questions or concerns you may in regards to anything within the contract. It would be my pleasure to provide clarification at any time. I look forward to working with you on your special occasion!

BRIDE AND BRIDAL PARTY SERVICES

- ◆Bridal Application\$150
(Includes Pre Wedding Consultation /Application & False Lash Application)
- ◆Wedding Party Application.....\$65 (Per Person w/o lashes)
\$75 (Per Person with lashes)
- ◆Junior Bridesmaids (17 yrs & under) \$30 (Per Person)
- ◆False Eyelashes ONLY (choose from a selection of strips).....\$10

SPECIAL OCCASSIONS

- ◆Full Face With Lashes (choose from a selection of strips)\$75
- ◆Full Face Without Lashes\$65

MAKEUP CLASSES

- ◆ Group Sessions4 hrs \$75 (Per Person, Maximum 12)
- ◆ 1—on—1 Sessions.....60 min \$60 , 120 min \$90

Gratuity not included in service prices

CANCELLATION POLICY

Cancellations must be made at least (3) days prior to your reserved date or you will be responsible for the full amount of services agreed upon in this contract

DEPOSIT (Weddings ONLY)

A non-refundable deposit of \$25 is required in order to reserve your date . The remaining balance is due the day of services

PAYMENT

All payments (deposits and balances) can be made by cash, CashApp, Paypal or Chase QuickPay

CashApp: Tiffanytonimua
Paypal: tiffanytoni@hotmail.com
Chase QuickPay: tiffanytoni2@gmail.com

CLIENT INFORMATION:

NAME: _____

PHONE _____ EMAIL _____

DATE OF EVENT _____ TIME _____ Wedding Special Occasion Classes

ADDRESS (OF MAKEUP APPLICATION/CLASS) _____

TOTAL NUMBER OF PEOPLE _____

KNOWN ALLERGIES (FOR ALL RECEIVING SERVICES) _____

BOOKINGS: To secure a date, a signed contract is required with a \$25 deposit due at the time of signing. The deposit is non-refundable and non-transferable unless cancelled by the artist. Please be advised, dates, and scheduled makeup times will only be reserved when a signed contract and deposit are received

Initial _____

DELAYS: A late fee of \$25.00 will be charged for every 30 minutes of delay when a client is late for the scheduled time, or if scheduled makeup exceeds allotted time because of client delays. For every 30 minutes that the **artist** is late, \$25.00 will be deducted from her final payment, for proms/special occasions \$10 will be deducted from the artist's final payment

Initial _____

SERVICE LOCATION AND REQUIREMENTS: Location of service for the day-of-event will be at the discretion of the client, but there are certain requirements the makeup artist needs to complete the makeup applications. A "set up" table/work area needs to be made available for the makeup artist at said location. Ample lighting, whether by means of natural light or by lamps, is necessary for services to be performed properly

Initial _____

CANCELLATION POLICY: Cancellations must be made at least (3) days prior to your reserved date or you will be responsible for the amount of services agreed upon in this contract. All deposits are non-refundable if the client cancels. If a cancellation occurs due to an emergency or other unforeseen circumstances with the artist, a full refund of all monies paid, including the deposit will be issued and no legal actions will be taken against the artist

Initial _____

PARKING FEES: Where parking, valet or toll fees may be incurred, the amount will be included with the final billing and due for payment on the day of the event **Initial** _____

TRAVEL FEE: A mileage fee will be charged for locations outside of a forty (40) mile radius of the city of Chicago, IL 60615 zip code. The amount will be determined at time of booking **Initial** _____

LIABILITY: All brushes and makeup products are kept sanitary and are sanitized between every makeup application. Makeup products used are hypoallergenic. Any skin condition should be reported by the client to the makeup artist prior to application and, if need be, a sample test of makeup may be performed on the skin to test reaction. Client(s) agree to release the makeup artist (Tiffany White) from liability for any skin complications due to allergic reactions **Initial** _____

PAYMENT: The final balance is due on the day of the event as one payment – no exceptions. The person(s) responsible for the entire balance of payment is the person(s) who has signed the booking contract **Initial** _____

ADVERTISING: Customer agrees to allow before and after pictures to use for portfolio promotional use and for advertising purposes on www.TiffanyToniMUA.org and other promotional materials for business purposes only **Initial** _____

ADDITIONAL NOTES:

By signing below I am agreeing to all terms and conditions outlined in this contract presented to me by makeup artist Tiffany White (TiffanyToni MUA) and no other conditions or agreements outside of this written contract will be binding for either parties. Both parties will be held in violation of this agreement if any condition is not honored.

Signature of Client _____ Date _____

Signature of Artist _____ Date _____

Total Cost of Booking \$ _____

Deposit Amount **\$25**