337.849.9258• stephanie\_carmouche@icloud.com •

# Beautifully Beat Bridal Contract

Thank you for your interest in Beautifully Beat makeup services. Please carefully review this bridal contract. I require this contract to be completed and submitted with a non-refundable deposit of $100.00 in order to secure your wedding date. The complete balance for your bridal party will be due the week ( 7 Days ) before the client’s wedding day. No money will be collected the day of the wedding ceremony. With the exception of additional services IF time permits. Please feel free to contact me with any questions or concerns you may have regarding your wedding appointments. I look forward to working with you and your bridal party. Thank you and congratulations!

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| --- | --- |
| **BRIDE AND BRIDAL PARTY SERVICES**    | **TRAVEL**  |
| Bridal Makeup Consultation.......................................$50.00  | Travel fee for first 20mi.........................................No Charge  |
| Bridal Wedding Day Application...............................$90.00  | Each additional mile after 20mi............$0.50/mile both ways  |
| Bridesmaid Makeup Application................................$70.00   | \*Parking fees/tolls must be paid by bride if applicable.  |

BRIDE’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WEDDING DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESIRED FINISH TIME FOR APPOINTMENTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAKEUP ARTIST WILL ARRIVE AT \_\_\_\_\_\_\_\_\_\_\_\_\_\_ AT THE FOLLOWING LOCATION

ADDRESS OF GETTING-READY LOCATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WEDDING DAY MAKEUP RECIPIENTS: (e.g: bride, mother-of-bride, two bridesmaids, etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL TRADITIONAL MAKEUP RECIPIENTS (EXCLUDING BRIDE): \_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , agree to have my appointments scheduled as needed, and the prices and policies listed in this contract as applicable to my scheduled appointments**. I understand and agree to pay the non-refundable security deposit to secure the appointment(s) for my party. I agree to pay the complete balance for my wedding party on the date listed in this contract or prior to the wedding date. I understand and will comply with the cancellation policy. I understand that no refund will be given for members of the wedding party who miss their appointment on the day of the wedding. I also understand that I am responsible for balances from any members of my party who fail to provide payment.**

Bride’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Makeup Artist’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**POLICIES**

***Please note that my services require a minimum of $450***

**BOOKINGS:** To secure a date, a signed bridal contract and $100.00 deposit are required. The deposit is non-refundable and non-transferable. This deposit is not subtracted from your total service price. The remaining balance will be due one week prior to event. (Please note that the bridal consultation is also not included in the deposit fee.)

**DELAYS:** Any bridesmaids who are not on time for their scheduled appointment, which is 5 minutes prior, will automatically be cancelled without refund.

**SATISFACTION GUARANTEED:** Makeup will be completed to the client’s satisfaction, and acceptance of the

completed makeup application is acknowledgement by the client that the makeup is done to the client’s satisfaction.

**PARKING FEES:** Where parking, valet or toll fees may be incurred. This amount will be included in the final bill and will be due on the day of the event.

**TRAVEL FEES:** Travel within 20 miles of Lafayette, Louisiana is completely free of charge. A mileage fee ($0.50/mile both ways) will be charged for locations outside of the 20-mile radius of Lafayette, Louisiana.

**LIABILITY:** All brushes, tools, and makeup products are sanitized between every makeup application. Makeup products used are hypoallergenic. Any allergies and/or skin conditions 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 (Stephanie Carmouche) from liability for any skin complications due to allergic reactions.

**PAYMENT:** The final balance is due one week prior to the scheduled event — **NO EXCEPTIONS**. The person(s) responsible for the entire balance of payment is the person(s) whose name(s) appear on this contract.

**CANCELLATION POLICY:** Cancellations must be made at least thirty (30) days prior to the client’s reserved date or the client will be responsible for paying the full amount of services agreed upon in this contract.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give my consent to be photographed with the understanding that my pictures could be used in the future for advertising, on a website and/or any portfolio for future clients to review. I understand my name will not be disclosed with the use of my picture.

Bride’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_