

fresh faces by Cindy

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Makeup Agreement

Today's Date: _____

Client's Name: _____

Address: _____

Phone Number: _____ /Cell Number: _____

E-Mail Address: _____

Event Date: _____ /Time: _____ am/pm

Location & Time of Makeup Application: Location: _____ /Time: _____

Fee Structure:

• Engagement/Photo Shoot Makeup	\$100	\$ _____
• Brides Makeup Application (<i>includes consultation/trial</i>)	\$120	\$ _____
• Bridal Party/Mother's Makeup Application	\$50 per person X _____	\$ _____
• Flower Girl(s) Makeup Application	\$15 per person X _____	\$ _____
• Strip Lashes	\$20 X _____	\$ _____
• Lipstick (<i>if you wish to purchase the lipstick used during trial</i>)	\$24	\$ _____
• Special Travel Fee (<i>charged for distances over one (1) hour – see below</i>)		\$ _____
• Tattoo Coverage - starts at \$25 (<i>price depends on size of tattoo</i>)		\$ _____

TOTAL AMOUNT DUE = _____ - \$60 deposit = \$ _____ payable in full on day of event.

Terms and Conditions:

- A **non-refundable** deposit of \$60 payable by cash or check (*to Cindy Hoke*) is due at time of Consultation and agreement signing. The deposit is applied towards your final balance due in full immediately after services are completed.
- An hourly rate of \$30 will be charged for any touch-ups and/or continued on-site services after the initial application.
- A special travel rate will be charged for distances over one (1) hour for all consultations/trials/etc. and day of event.

I have read and understand the terms and conditions outlined above. I will abide by this agreement.

(Client) Print Name: _____

(Client) Signature: _____ Date: _____

fresh faces by Cindy/cindy hoke • certified makeup artist

Signature: _____ Date: _____