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**2023 Makeup and Skincare Service Contract & Consent Form**

619 North Morton Street Bloomington, IN 47404 812-360-0714 [www.lashenvyindiana.com](http://www.lashenvyindiana.com)

Thank you for choosing Lé Esthetics for your event makeup needs, we look forward to helping you prepare and feel your best for your special day! Please call 812-360-0714 or email leestheticsindiana@gmail.com with any questions you have regarding our contract. A nonrefundable deposit is required to secure your event/wedding date.

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| --- | --- |
| Name: Today’s Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Event/Wedding Venue Name and Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_Zip:\_\_\_\_\_\_\_  Best Contact Phone Number(s) on day of the event:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Consultation/Trial Date and Time:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Wedding Planner (Day of) Contact #:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Event/Wedding Date & Time:  Time Bride Must Be Finished:  Time Bridal Party Must Be Finished:  Exact Address Where You’ll Be Getting Ready:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Service From  \_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_ |

# Rates/Deposits for Services

***Pre Wedding Makeup:***

**Bridal Makeup Consultation**-Includes image discussion and trial (1hr-1hr 30min $80-$100, must request 1hr 30 min appointment ahead of time)

Engagement Photo Makeup-On location $125

Bridal Portrait Makeup- On location $125

## Wedding Day Services

**Bridal Makeup at Ceremony**- Include Faux Lashes (1 hr-1hr 30 min) $100

# of Clients\_\_\_\_\_

Names\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother of the Bride/Groom** (30-45 min) – Includes Faux Lashes - $80

# of Clients \_\_\_\_\_

Names\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Maid of Honor/Bridesmaid/ Hostess**- additional Includes Faux Lashes (30-45 min) $80

# of Clients\_\_\_\_\_ Names\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Junior Bridesmaid-** (14 years old and younger, 30-45 min) $40(Mascara, blush, lipstick/gloss-$80(Full Face)

# of Clients\_\_\_\_\_

Names\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Flower Girl-** Free gloss and blush application

# of Clients\_\_\_\_\_

Names\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Additional Services

•Spray Tanning, Lash Extension, Lash Lift, Lash & Brow Tint, Full Body Waxing, Teeth Whitening, Facials/Hydrafacial, Semi Permanent Makeup, **Groomsmen** services and other services available upon request.

•Day of Cluster/ Flare Lashes $30 (**Must let us know before day of event**)

•Local Travel Fee (applies to all **onsite** locations **in** Bloomington)- $10 additional per person per service for onsite services. (Ex. Maid of Honor Airbrush $80 + $10= $90 if onsite)

Travel Fee (applies to all locations **outside** of Bloomington IN) $25+ \_\_\_\_\_

•Parking Fee for All Downtown Hotels- TBD \_\_\_\_\_

•Call times earlier than 8:00am $25 additional per makeup artist \_\_\_\_\_

•Holiday Fee (applies for any date that falls on a Sunday or national holiday) additional 25% of total service cost ­­­­­­\_\_\_\_\_

Rental Fee-$199.00 Rental Fee to have services performed at Lé Esthetics if you have a party of 5 or more. This rental fee also allows you to provide food and drinks for your wedding party, you must leave our studio in the condition it was in when you arrived. Please dispose of any food, drinks, or anything else that you may have brought. You will be charged an additional $100 cleaning fee if the studio is not left in its original condition following services. INITIAL\_\_\_\_\_\_\_

**Total\_\_\_\_\_\_\_\_**

**Deposit ($100+) \_\_\_\_\_\_\_\_**

**Amount Due Day of Service \_\_\_\_\_\_\_\_ (Parking Fees May Accrue, See Below) Client Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Lé ESTHETICS CONSENT FOR MAKEUP AND SKINCARE APPLICATION AND CONSENT:**

I have agreed to have Lash Envy LLC DBA Lé Esthetics and/or makeup artist apply and/or remove my makeup and skincare. Before the makeup artist can perform this work, I understand I must complete this agreement and provide my informed consent by signing and dating where indicated below.

1. **Waiver of Liability.**
   * I understand there are risks associated with having makeup, skincare, and eyelash strips applied. All brushes and makeup/skincare products are kept sanitary and are sanitized between every makeup/ skincare application. 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 and/or skincare may be performed on the skin to test reaction. Client(s) agree to release the makeup artist from liability for any skin complications due to allergic reactions. I understand that I will be in direct contact with various cosmetics and products topically applied. I am aware of the following specific chemicals and / or cosmetics of which I am allergic or have sensitivity to:

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

* + If the makeup artist cancels or cannot perform the makeup service for any reason Lash Envy LLC and/or makeup artist is not responsible for any monetary costs.
  + Lash Envy and/or the makeup artist are not responsible for any damage done to clients’ home or personal belongings/property at time of service.

2. **Permission to Use Pictures.** I hereby grant Lé Esthetics (Lash Envy LLC) the full right to take, publish, and reproduce photographs of me, my face, my eyes, and/or eyelashes, both before and after this makeup and/or skincare is applied for any advertising, education, or other purposes whatsoever, including the right to retouch these photographs as deemed necessary by the professional or Lash Envy. I further expressly assign any copyright in these photographs to Lash Envy. I also grant my consent to the professional and Lash Envy to use my image and likeness as contained in these photographs for any advertising or other purposes.

1. **No Known Medical Conditions/Informed Consent.** I have read and completed the Lé Esthetics (Lash Envy LLC) intake form in its entirety and in truth. I acknowledge that I have been advised of the potential harmful or negative side effects that the makeup, skincare, and eyelash strip procedure or removal may cause to those who have specific medical or skin conditions.
2. This agreement will remain in effect for this makeup, skincare, and eyelash strip application, and all future applications conducted by the makeup artist, Lé Esthetics (Lash Envy LLC) and/or any other professional conducting business at or with the establishment listed above.
3. **Cancellations**: Should a client cancel the booked event or any service on a contract, the deposit will not be refunded or transferred under any circumstances. Client must cancel at least **60 days** prior to the event to avoid paying the full-service amount. All cancelations less than 60 days prior to the event will be responsible for full payment to Lé Esthetics (Lash Envy LLC) and/ or the makeup artist.

**PARKING FEES:**

Where valet or parking fees may be incurred, the client will handle the amount the day services are provided.

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**TRAVEL FEE:**

A mileage fee will be charged for locations outside of the Bloomington IN. The amount will be determined at the time of the inquiry ($25 +).

No mileage fee for SELECT venues.

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**Balance is due in full for all services the day of the event before services begin (Credit Card or Cash Accepted).**

**Please arrive with a clean and makeup-free face.**

**Onsite services require a 5-person minimum.**

**Please be prepared for our makeup artists’ arrival 15-30 minutes before the service start time by having a designated area with natural or bright lighting and outlets.**

**Each service will take 30-45 minutes except for the bride, 45min- 1hour 30 minutes.**

**No changes can be made on the day of the event, please make all changes at least 30 days before the event.**

**Please make sure that all clients arrive on time to avoid additional charges.**

**Please submit this contract and pay $100 nonrefundable deposit to secure your event date. Credit/ Debit or Cash preferred.**

**Please fill out and sign this contract and submit in person, by mail, or email to:**

***If In Person:***

*619 North Morton Street Suite #1*

*Bloomington, IN 47404*

***If Mailing Contract:***

ATTN: Bridal Contract

Lé Esthetics

PO Box 74

Clear Creek, IN 47426

***If Emailing Contract (Please Call Us As Well 812-360-0714):***

Subject Line: Bridal Contract

Email Address: leestheticsindiana@gmail.com

I agree that this Agreement is binding upon me, and my heirs, legal representatives, and assigns. I represent that I am over 18 years of age and that I have the right to enter the agreement, or if I am under 18 years of age, I have had my parent or legal guardian consent to this agreement, and his or her relationship to me is as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. By his or her signature below, he or she ratifies and consents to this application under these terms.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_