

**Face Painting, & Henna Service Agreement**

5112 Hidden Vista Court, #F-308

Simi Valley, CA 93063

Phone (949) 376-1411

Email: facesbyhaleh@gmail.com      www.FacesByHaleh.com

**Invoice and Agreement for Artist's Services**

Please Print out, sign agreement, and mail it back to me.

Todays Date: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Cell#: \_\_\_\_\_ Email: \_\_\_\_\_

Event Address/ Location : \_\_\_\_\_

Will the party be inside or out? \_\_\_\_\_

Please provide a table and two chairs & LIGHT for evening, shade for sunny conditions.

Party Address please / Major Cross Streets : \_\_\_\_\_

\_\_\_\_\_

Date Of Event: \_\_\_\_\_ Day of the week: \_\_\_\_\_

Time Artist will begin: \_\_\_\_\_ Time Artist will end: \_\_\_\_\_

Total Hours: \_\_\_\_\_ X \$ \_\_\_\_\_ an hour = \$ \_\_\_\_\_

Deposit Paid: \$ \_\_\_\_\_ Total Due: \$ \_\_\_\_\_

Client Agrees to pay full amount even if client actually uses artist for less time than booked. Deposit is 50% of scheduled time: \$ \_\_\_\_\_. The deposit may be paid in advance by check payable to: Haleh Risdana (There will be a \$30.00 charge for returned checks), or online via Pay Pal to [facesbyhaleh@gmail.com](mailto:facesbyhaleh@gmail.com). The balance is due in CASH upon the artists arrival. The time slot will not be reserved until deposit is paid. Client understands once the agreement is signed, all other clients requesting that time slot will be turned away, so should client cancel or postpone, the deposit will not be refunded.

**Liability Statement:**

Artist is not liable for allergic reactions to paints or makeup. Children or persons with skin allergies or sensitive skin should either not participate, or have Artist perform a patch test at the beginning of the party. Artist will not paint anyone who appears to be sick or suffering from: cold sores, any infectious skin, or open wounds. Artist will always use responsible care, but is not responsible for damage to clothing or property. All products used to create body are FDA approved. I have read, understand and accept the above Liability Statement, and the conditions of this agreement. I accept the details of this agreement as accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you,  
Haleh

