

Impish grin

face art • www.impish-grin.com

8632 Belcrest Drive, Saint Louis, MO 63114
(314) 602-7939 admin@clapifyoubelieve.com

INVOICE AND AGREEMENT FOR FACE PAINTING SERVICES

Client Information:

Client name: _____ Email: _____

Address: _____

Home/Main phone # _____ Cell phone # _____

Event Information:

Date of Event: _____ Day of Week: _____ Start Time*: _____ AM/PM End Time*: _____ AM/PM

Party Type / Theme: _____ Guest of honor name/ age: _____

Age range of attendees at the event: _____ Approximate attendance at event: _____

Location of event if different from above: _____

Where parking can be obtained _____

Please check if Parking Pass is required (If permit parking or passes are required, these MUST be received one week before the event, mailed to above address.)

Day of event contact at location (name & #) _____

Fees:

- **One Hour Minimum: \$140.00** (incl. one painter, 60 mi. round-trip travel, setup time, all materials)
- **Additional ½ Hour: \$60**
- **Additional Hour: \$100**

For larger groups or time-sensitive events, **additional artists are available** for a charge of \$75 per artist per hour. Note that *each painter* can paint approx. 10-12 full-face designs per hour, or approx. 20 small designs.

Travel fees will be determined on events requiring more than 60 miles round trip from the company address above. (Please call if you need assistance determining a total.)

Total Amount Due: _____ **50% of Total (this is your deposit amount owed now)** _____

* Only booked times (as given above) with accompanying deposits are guaranteed. Additional time for the day of the event may not be available.

A signed agreement and a 50% deposit are required to secure the booking date agreed upon between client and artist. Dates agreed upon either verbally or through email will be held for five (5) business days to provide a wait period to receive your deposit. If the deposit is not received within seven (7) days of receipt of a signed agreement, the agreement is null and void. The 50% deposit is non-refundable should the client decide to cancel or postpone the event. *Payment in full is required for events canceling the week of the contracted event.* In the case of postponement, Impish Grin Face Art will work with you to accommodate an alternate date; however, due to the high volume of bookings, you may not receive your first alternate choice. Please notify us immediately of any changes.

The balance owed is due IMMEDIATELY following the event, with balance payments made at that time.

Make checks payable to IMPISH GRIN FACE ART. DO NOT MAIL CASH. Credit card payments are accepted online upon request.

Limitations on Artwork: Artists will not paint any part of body that is illegal to expose, or any place she does not feel comfortable painting. Artist(s) will not paint any design or wording that is obscene, offensive, or defies good taste. For sanitary reasons, artists will not paint anyone who appears to be sick or suffering from cold sores, conjunctivitis, or any infectious skin condition or open wounds.

Artist agrees to provide services of general face painting using only Professional Theatrical Cosmetic grade FDA approved products on said dates with acceptance of 50% deposit. Artist also agrees that a liability insurance policy is current and will provide current insurance certificate upon request. For any reason, should Impish Grin Face Art be unable to accommodate your paid booking, a full refund of your deposit will be returned to you or you may receive your next event for the equal amount of time with no further payment required.

Client agrees to pay the full amount of booked time immediately upon completion of face painting services. The client will be responsible for any fees or expenses, including attorney's fees, incurred in connection with collecting delinquent amounts owed to Impish Grin Face Art under this Agreement. Client will provide sheltered area in event of rain, and provide shaded area in extreme heat.

I have read, understand and accept the above conditions of this Agreement. I also accept the event information to be correct and accurate:

Client Name (please print) _____

Client Signature _____

Date _____

IG Rep _____

Date _____

<u>For office use only</u>
Date Form R'cd _____
Date Dep. R'cd _____
Method of Pymt. _____
RT _____
CDSBR