

Isabel Houghton
Professional Beauty Therapist
& Make-up Artist

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WEDDING MAKE-UP CONTRACT

Name of bride	
Contact numbers	
Email address	
Date of wedding	
Time of wedding	
Trial date and time	
Trial address	1530 Piazza Del Campo Estate, Van Wyk Louw Drive, Parkrand, Boksburg
Wedding venue	
Address where you will be getting ready	
Additional people requiring make-up (mother-of-the-bride, bridesmaids etc)	
Where did you hear about me?	

PLEASE NOTE THE FOLLOWING TERMS AND CONDITIONS OF CONTRACT:

50% payment (excluding payment of the trial) is due on the day of the trial to secure your booking (cash or eft – no cheques). Please quote your name and wedding date on transfer. The date of the wedding booking is only confirmed when the amount has been paid and the contract is signed.

My banking details are as follows:

Account Name: Isabel Houghton

Savings account

Account number: 859261159

Branch Name: ABSA

Branch Code: 632005

- ❖ Travelling fee: No travel fee for the Boksburg area. For areas outside this area: R6 per km. Tollgates charged extra.
- ❖ The remaining 50% payment is due at least FOUR WEEKS BEFORE the wedding for which a receipt will be issued as proof of payment. If payment is not settled, I will not come out on your wedding day. Late payments will be penalised by 10% of total amount.
- ❖ Cancellation within 6 weeks of the wedding requires 50% payment of complete booking i.e. including bridesmaids, mothers, etc
- ❖ Cancellation within 1 week of the wedding requires 100% payment of complete booking i.e including bridesmaids, mothers, etc.

Signature: _____

Date: _____

Please email or fax to 086 654 8108 when completed.

THANK YOU