

MAKEUP RELEASE FORM

Lure Beauty

1. **LIABILITY [Please check mark]:**

- ☐ I agree to have makeup applied to my face and/or body. By signing this agreement, I consent to the application and services by my Makeup Artist.
- ☐ I agree and understand that it is my full responsibility to notify my Makeup Artist of any allergies or sensitivity that I have and are aware of towards any cosmetic and/or chemical products prior to the makeup service/application.
- ☐ I agree and understand that should a reaction occur, requiring medical attention or not, I release my Makeup Artist from being held legally liable or responsible for all costs, injury and/or ailment of any kind that could arise. I agree and understand that I surrender my right to sue or bring a claim against my Makeup Artist for any reason.
- ☐ This agreement is binding and will remain in effect for this Makeup application and all future Makeup applications provided by my Makeup Artist.

2. **MISCELLANEOUS:**

- a) **Photography:** I, _____, give my full consent to be photographed and/or recorded before, during, and/or after any Makeup services provided by Saphron Collins of Lure Beauty with the understanding that my photo could be used in the future for marketing, advertising, and promotional purposes on a website, social media, and/or in my Makeup Artist's portfolio for future Clients to view. I understand that my name and personal information will not be disclosed with the use of my photo.

Please check [YES] or [NO] as it applies to you:

YES NO

- | | | |
|-------|-------|--|
| _____ | _____ | Allergies to Adhesives (glues, tapes, etc.) – Tapes and glues may cause allergic reaction. |
| _____ | _____ | Allergies to Ingredients/Chemicals/Products (latex, talc, silica, glitter, etc.) – Some products may contain these ingredients and cause allergic reaction. |
| _____ | _____ | Chemotherapy Treatments Within the Last 6 Months – The medication for chemotherapy may cause a reaction to materials and/or products used during makeup services. |

