

INFORMATION REQUEST FOR EVENT

Name of Client: _____

Address of Client: _____

Email Address: _____

Date of Event: _____ Phone #: _____

1) Contact Name and Phone for that Day:

2) Itinerary for the Day. The following are addresses for day's destinations:

a) Place and Address of Preparation Location:

b) Location of Event:

Event Start Time: _____

What time do you need to be ready at the latest by?: _____

How far do you need to travel to the event location?: _____

Will I be needed for touch-ups?: _____

3) Other Clients:

Number of people needing services: _____

Number wanting makeup: _____

Number wanting hair: _____

Invoice altogether or separately?: _____

Email back to katiebetian@gmail.com

OR

Fax to : (626) 529-3593