**CLIENT NAME:** _____

**MAKEUP LOOK:** _____

**PHONE:** _____

**EMAIL:** _____

**SKIN**

Cleanser(s) used: _____

_____

_____

Moisturizer(s) used: _____

_____

_____

**FACE**

Foundation color/brand/texture: _____

Concealer color/brand/texture: _____

Powder color/brand/texture: _____

Bronzer color/brand/texture: _____

**EYES**

Brow pencil/powder color(s): _____

_____

Highlight color(s)/texture: _____

_____

Lid crease color(s)/texture: _____

_____

Eyeliner color(s)/texture: _____

_____

Mascara color: _____

False eyelashes type/color: _____

_____

**CHEEKS**

Blush color(s)/texture _____

_____

_____

**LIPS**

Liner color: _____
sdfsdf

Lip color(s)/texture: _____

_____

Gloss color/texture: _____

_____

**SPECIAL NEEDS/NOTES:**

_____

_____

_____