

MICHELLE SNEAD

Client First Name:	Client Last Name:	
Street Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	
Email Address:	Subject's Name:	
Relationship to Client:	Age, if child:	
Size of Portrait Approximate:	Medium:	Oil Pastel
Date of First Sitting (approximate):	Delivery Date Approximate:	
Portrait Price:	Deposit:	
 Sales Tax will be billed according to the laws of the state in which the client resides. Additional expenses: Client shall pay all costs to ship and frame the portrait, plus the travel and living expenses incurred in connection with the portrait. If not delivered in person, shipping expenses may include packing, crating, temporary frame, transport and insurance. Acceptance: The portrait is deemed accepted unless client requests alterations to the portrait within fourteen days after delivery. Payment: All payments will be made directly to Michelle Snead upon delivery of the portrait. Contract Term: The contract is void if the initial sitting has not occurred within one year of the date issued. Photos: Permission is granted for Michelle Snead to use photographs of the portrait without identification for promotional or sales purposes. 		
Additional Provisions:		
By the signatures below, the parties agree to the terms set forth above.		
Client:	Date:	
Artist:	Date:	