

My Personal Shopping Business Name
Client Contract

NAME: _____

CONTACT INFO:

Phone # _____ Alt # _____

Email @ _____

Billing Address: _____

SHOPPING ASSIGNMENT: (can attach detailed list)

Shop at Stores/Sites: _____

Avoid Brands/Stores/sites: _____

This Shopping Instance: ____ On Retainer for: _____
(Length of time)

Payment Arrangement: _____

Contract Signatures:

(Client) (Shopper)

Date: _____

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