



EAST WAY PHOTOGRAPHY

MODEL PORTFOLIO CHECKLIST

CONTACT INFORMATION:

model name: _____ date: _____

street address: _____

city: _____ state: _____ zip: _____

area code & phone#: _____

studio session:

Location: _____

Date: _____

Start Time: _____

End Time: _____

location session:

Location: _____

Date: _____

Start Time: _____

End Time: _____

hairstyle checklist:

Stylist (in studio): _____

Stylist (other): _____

Self-styling: _____

Other: _____

makeup checklist:

Stylist (in studio): _____

Stylist (other): _____

Self-styling: _____

Other: _____

shooting themes:

HEAD SHOTS: _____

FASHION: _____

GLAMOUR: _____

FIGURE: _____

shooting themes:

SPORTS: _____

OTHER: _____

wardrobe & props:
