

Micro Beauty Influencer Partnership Form

First Name

Last Name

Email Address

Instagram Handle

TikTok Handle

Country

Number of Followers (on primary platform)

Type of Beauty Content You Create

Why are you interested in partnering with us?

Previous Brand Collaborations (if any)

Which platforms do you use? (select all that apply)

Instagram	<input type="checkbox"/>
TikTok	<input type="checkbox"/>
YouTube	<input type="checkbox"/>
Blog	<input type="checkbox"/>