

HAIR STYLIST - CLIENT RECORD

Name

 Address

 Phone _____  Email _____

⚠ Allergies..... **👤 Referred by**.....

Other Info

HAIR ASSESSMENT

🔥 Hair Oil Levels **💡 Scalp Oil Levels** **👤 Hair Texture** **💧 Moisture Retention**

Hair Notes _____

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Date	Service	\$ - Price
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