

**\*YOUR LOGO HERE\***

## NEW CLIENT IN-TAKE FORM

All personal information is held securely and will not be shared. Please complete this form in full before we start your services today.

First & Last Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Preferred contact method: Text E-mail Call | Preferred apt. day: \_\_\_\_\_ Time: \_\_\_\_\_

How did you hear about me? \_\_\_\_\_ If referred, current client's name: \_\_\_\_\_

Have you ever had an allergic reaction to hair color? \_\_\_\_\_

Do you have any other known allergies? \_\_\_\_\_

Personal hair care products: \_\_\_\_\_

What do you love about your hair currently? \_\_\_\_\_

What are your current hair struggles? \_\_\_\_\_

Client remarks/suggestions: \_\_\_\_\_

\_\_\_\_\_

Thank you for taking the time to complete your new guest profile. This will help me to guarantee the best possible service for you today and for all future appointments. I will keep your profile on file and will reach out to you should any promotions or specials come up that I think you may be interested in. I strive to offer my guests the highest level of customer satisfaction. Please feel free to reach out to me at any time if I can be of assistance.