

## A-LIST LENGTHS CLIENT CONSULTATION FORM

### Contact Details

Your Name : \_\_\_\_\_

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

PostCode : \_\_\_\_\_

Mobile : \_\_\_\_\_

Email : \_\_\_\_\_

How did you hear about A List Lengths? \_\_\_\_\_

Have you had hair extensions before?

Yes/No

If yes, which type have you had? \_\_\_\_\_

Have you ever suffered from hair loss/Alopecia?

Yes/No

Have you ever had Chemotherapy?

Yes/No

Are you taking any medications that can affect hair growth?

Yes/No

Are you pregnant or had a child in the past 6 months?

Yes/No

Do you suffer any sensitivities or allergies?

Yes/No

Currently, how is your natural hair?

Permed/Tinted/Bleached/Virgin

Please tick all options that describe the condition of your natural hair?

Dry Weak Damaged Greasy Coloured

Please describe the thickness of your natural hair?

Is your hair longer than 4 or 5 inches?

Thin Medium Thick

Yes/No

What colour is your natural hair? \_\_\_\_\_

Any further comments / queries? \_\_\_\_\_

I do certify that the above information I have provided is correct to my knowledge and that I have read the aftercare leaflet, I also agree to carry out all of the advice given to me by this and by you, the stylist.

I will not hold the stylist responsible for any damage caused by myself for failing to carry out the information and instructions given to me, or as a result of wearing the extensions or for supplying any incorrect information at any time.

I understand that regular maintenance is required to keep my extensions at their best (every 6-8 weeks) and removal must be carried out after 6 months by A List Lengths or another professionally trained hair extension technician.

I understand that it is always at my own risk that I have hair extensions fitted and also that A List Lengths policies are to refit any strands free of charge if more than 10 have fallen out in the first 2 weeks, after two weeks refitting is chargeable at the maintenance rate agreed with the stylist. There are absolutely no guarantees the hair will not cause tenderness, hair loss or slight damage to my head and I will not hold my stylist responsible for any of the above listed possible side affects.

I am happy to order my hair extensions through my stylists' recommended supplier and understand that any faults with the hair must be taken up directly with the supplier and are not responsibility of the stylist. Removal of any faulty hair will incur the full removal charge.

Please tick the box to confirm you have read and understood the information above. ☐

Signed, Client (Or parent/guardian of any client under 18)

Date

Signed A List Lengths

Date