Hair Extensions Client Intake Form

General Information						
Name		Date of Birth				
Address						
City State		Zip Code				
Phone #	Email					
Occupation						
Emergency Contact Name		Phone #				
Would you like to be added to our email list for specials and discounts?			3	No		
How did you hear about us?						
Have you had extensions before?			S	No		
If yes, please describe your extension history in the space below:						
Medical History						
Do you suffer from health problems that may cause extensions to be unsuitable? Are you taking medication that affects your hair growth? Do you suffer from Eczema or Psoriasis? Do you have an itchy or sensitive scalp? Have you ever suffered from Alopecia or any type of hair loss? Have you ever had Chemotherapy? Are you or could you be pregnant? Have you given birth within the last 6 months? Do you suffer from greasy hair? Do any products cause your scalp to itch, become dry, or greasy? Do the best of your knowledge, do you have hair damage or breakage? Do you have any allergies?			No No No No No No No No No			
If yes, please explain:	\$2	Yes	No	1		
Are you currently taking any medications or supplements? Yes No If yes, please explain: If yes, please explain: If yes, please explain:						
Lifestyle Questions		Yes		1		
Do you exercise regularly? Do you use saunas or steam rooms? Do you use tanning beds? Do you wear protective head gear (i.e. helmets)? Do you wear glasses?			No No No No No No]		

Hair Extensions Liability Waiver

Please read and initial each of the statements below:

I give permission to	to place extensions in my hair. I will not hold them
responsible for any adverse health reactions as a result	of this service.
I understand that hair extensions may cause d	lamage to the integrity of my hair.
I understand that more maintenance may be	required after this initial treatment.
I understand that the additional maintenance	required to maintain my hair may come with added costs including but
not limited to deep conditioning treatments, return appo	pintments, and/or professional haircare products.
I understand the price for today's service and t	that there are no refunds.
I understand that the price for today's service of	does NOT include the cost of removing the extensions.
I grant permission to	to take and use: photographs and/or digital images of
me for use in news releases, educational materials and	or social media platforms including but not limited to Instagram,
Facebook, Twitter, Tik Toc, and Pinterest.	
I have received the Salon post-care instruction	ns card and I agree to follow them. I understand that my failure to follow
the post-care instructions may negatively affect my ha	ir. I agree to ONLY use K18, Bhave or Amika and as directed.
I understand that my stylist will do their absolu	te best to create the best results, however, I understand each person's
hair varies so my stylist cannot guarantee that my hair	will look exactly like the picture shown or the style described.
I agree that if an allergic reaction occurs I will r	not hold the technician, stylist or the salon at fault.
I understand that this salon has the right to ref	use service to anyone.
I agree that in the event that I decide that I no	longer want to keep the hair extensions, I am fully responsible for the
total payment of the hair extensions and the services re	under word

By signing below, I agree to the following:

I have read or have had read to me the contents of this whole form. I understand the benefits and risks and alternatives involved in this procedure and I have had the opportunity to ask questions and all of my questions have been answered. I accept full responsibility for the decision to have the discussed service done and understand that there is a no refund policy. I hold the stylist, the salon and Salon Xtensions, LLC harmless and will not pursue any recourse. I acknowledge that I have reviewed and approved the material given to me.

Name Printed

Signature

Date

Stylist Name

Signature

Date

Hair Extensions Post Care

Washing

- Do not shampoo hair for at least 3 days after installation.
- I agree to install and use a showerhead water filter. Recommended: Jolie
- It is recommended that you (using the SalonX Extension Brush) gently brush and take out any tangles before washing your hair. Always hold the hair with one hand as you brush starting at the bottom and working your way to the top.
- Shampoo hair in a gentle manner, following the direction of hair flow.
- Only use the Amika, K18 or Bhave, gently shampoo with your head tilted back (not forward) gently squeezing the shampoo from top/scalp to bottom of the hair. Do not massage/scrub the hair extensions, it will cause matting and tangling. Rinse with lukewarm, not hot water, squeeze out excess water, and wrap hair in a towel. Do not use a scrubbing motion to dry the hair. Always dry the bonds to help prevent any breakdown.
- Condition hair using one of the brands matched conditioner from just below the tip of the extension to the ends.
- Rinse with cold water and follow up with a leave in mask from the matched brand. Do not mix brands.
- Everyday, use a small amount of hair oil. Spray two misting sprays of hair oils on your palms and run through your extensions. Do this on a daily basis to keep extensions moisturized.

Brushing & Styling

- Use the SalonX Extension Brush to detangle the hair starting at the ends and working your way up to the scalp.
- Dry hair 80% to 90% before using an extension brush to finish your blow-dry style.
- Use the recommended hair extension brush (SalonX Boar Bristle Extension Brush)
- Do not put direct stress on the bonds. When using a blow dryer, flat irons, etc, do not apply heat directly to the bonds.
- Before blow-drying, separate/detangle the hair using a wide tooth comb. Work the hair starting at the ends. When drying
 do not apply heat directly to the hair extension bonds. (Note: When using flat irons, hot rollers or curling irons keep a safe
 distance away from the bonds.) Always use a heat protectant spray before ironing, curling or blow drying. Never exceed
 380 degrees on any hot tool.

Other Maintenance Recommendations

- Run fingers through hair daily making sure the bonds stay separated.
- Never go to bed with wet hair. Always make sure your hair is dry and tied back in a loose ponytail before going to sleep.
- To prevent tangling, never go to bed with wet hair. Dry hair and tie back in a loose ponytail or loosely braided.
- Salt and chlorinated water can break down the bonds of your hair extensions. To reduce the effects, wash hair immediately after swimming and immediately use the shampoo, conditioner and mask to reset the PH balance. Follow the directions for drying the hair and bonds.
- Expect to lose some extension strands, this is normal.
- The average person loses 100 of their own hairs per day. Over a period of time, you will accumulate a small amount of naturally released hair in the bonds. This is normal. Regular gentle brushing will reduce the risk of matting and tangling.

SALON XTENSIONS

Hair Extensions Consultation

Hair Information			
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Length of client's natural hair:	Short	Medium	
Client's hair texture:	Curly	Straight	Wavy
Client's hair type:	Broken	Dry	Greasy
	Normal	Thin	
Elasticity:	Pass	🗌 Fail	
Porosity:	Pass	🗌 Fail	
Pull test:	Pass	🗆 Fail	
The client's hair is suitable for the	hair extension s	ervice 🗌 Yes	No
Service Information			
Grams/Strands:			
Length:			
Color:			
Method:			
Deisiaa			
Pricing			
Total Price:			
Deposit:			
Initial Fitting:			
Maintenance:			

Home Hair Care Products

Brand:	
Shampoo:	
Conditioner:	
Mask:	