

| in natural lighting & your #HAIRGOALS! inspiration photos when you send this back! Include a few different angles - No bathroom lighting please! | |
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| | |
| FIRST & LAST NAME | |
| | |
| EMAIL | |
| | |
| HAVE YOU COLORED YOUR HAIR? | |
| | |
| IF SO, DID YOU HAVE IT DONE IN A SALON OR AT HOME? | |
| (I WILL NOT YELL AT YOU I PROMISE!) | |
| | |
| HAS MONAT, OVERTONE, SPLAT, MANIC PANIC OR SIMILAR BEEN USED ON YOUR HAIR? | |
| | |
| PLEASE PROVIDE A FULL LIST OF ALL CHEMICAL SERVICES YOUR | |
| HAIR HAS RECEIVED | |
| HOW COMMITED TO HAIR MAINTENANCE ARE YOU? | |
| HOW COMMITED TO HAIR MAINTENANCE ARE 100: | |
| TELL ME YOUR LEVEL OF STYLING EXPERIENCE | |
| THE REPORT OF THE PARTY OF THE | |
| | |
| WOULD YOU BE INTERESTED IN LEARNING ABOUT HOW RETAIL PURCHASES IN THE SALON BENEFIT THE ENVIORNMENT AS MUCH AS | |
| YOUR HAIR??!! | |
| | |
| WHICH FRIEND REFERRED YOU? IF NOT A REFERAL HOW DID YOU LEARN ABOUT ME? | |
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