

Client record card

HAIR · BARBER

CLIENT

Name _____ Phone _____

Email _____ Birthday _____

Client since _____ Preferred stylist _____

HAIR

Thickness ☐ fine ☐ medium ☐ coarse

Texture ☐ straight ☐ wavy ☐ curly ☐ coily

Natural level / % grey _____

Scalp / allergies _____

Preferences (cut, styling, products) _____

COLOUR FORMULA

DATE	PRODUCT / SHADE / MIX	DEVELOPER	TIME	RESULT

NOTES

☐ Photos of the result may be taken for my record card.

Date _____ Signature _____

Visit log

NAME: _____

[illegible]