



FABULOZ Consultation

What are your goals with hair extensions?

Length____ Chemical-Free Color____ Density____ Other____

What type of extensions have you worn in the past?

Clip-In____ Tape-In____ Fusion____ Hand-Tied____ Sew-In____
Halo____ I-Tip____ Other____

Hair Analysis:

Texture- Fine/Medium/Coarse

Formation- Straight/Wavy/Curly/Extra-Curly

Formation Change Recommendation: _____

Density- Thin/Medium/Thick

Condition- Healthy/Normal-to-Dry/Compromised

Recommendations:

Treatment Recommendation: _____

Natural/Canvas Color: _____

Recommended Color Services: _____

Recommended Number of Bundles: _____

Recommended Extensions Colors: _____

Custom Coloring Needed: _____

Initial Installation Investment:

Deposit \$_____

Hair \$_____

Installation \$_____

Other Services \$_____

Products \$_____

Maintenance Installation Investment:

Installation \$_____

Other Services \$_____

Recommended Maintenance Schedule _____weeks