

## Beauty Shop

We would like you to take advantage of our Hair Care services which include: Shampoos, Sets, Haircuts, and Perms.

Notify the Beauty Shop in advance if services are needed for a special occasion. If closed make arrangements with Activity director.

In order to best meet your needs we ask that you complete this survey for our files. Please stop by the beauty shop with this form and we will set up your appointment.

Resident Name: \_\_\_\_\_

Please Check Service(s) Requested:

Shampoo only	\$ 3.00	_____
Shampoo and Set	\$ 10.00	_____
Haircut	\$ 10.00	_____
Perm (month of last perm)	\$ 35.00	_____
Color	\$ 25.00	_____

Type of Haircut: \_\_\_\_\_

Date of Recent Surgery or illness: \_\_\_\_\_

Allergies: \_\_\_\_\_

I give permission for the above to be provided.

Resident or Representative Signature: \_\_\_\_\_