

“Hair It Is” On-Line Consultation

Have you had extensions before?

- Yes*
- No*

What is the condition of your hair?

- Healthy*
- Slightly damaged*
- Severely damaged*

What is the length of your hair?

- Very short under 3”*
- Short 4” - 5”*
- Medium 6” - 7”*
- Long 8” - 9”*
- Very long over 10”*

How thick is your hair?

- Very thin*
- Fine and thin*
- Average*
- Thick*
- Very thick*

Which of the following have you done to your hair recently?

- Color*
- Highlight*
- Color and highlight*
- No color or highlight*

What is your hair texture?

- Chemically relaxed*
- Straight*
- Natural wave/body*
- Medium curl*
- Very curly*

What do you want extensions to do?

- Add length*
- Add highlights*
- Add lowlights*
- Add length and fullness*
- Fill in sides or other areas*

How long do you want your extensions to be?

- Shoulder length*
- Few inches past my shoulders*

- Mid back*
- Waist length*

Comments