After Care Service

Name	Contact Number	Email
1. Extension Details:		
Range Name:		
Colour Name:		
How many packets used?		
Date hair was fitted:		
How many re-tapes (if any) has been done?		
2. Please list full hair care products used on extensions:		
3. Please list what brand of curlers or straighteners were used and what was the temperature used on the extensions and how often?		
4. Have you been swimming in chlorine, spa, Jacuzzi or ocean?		
5. Do you brush your hair daily from roots to end?		
6. Do you apply Serum when brushing your hair and how often?		
7. Please tick this box if you have read our aftercare card []		
8. Please provide a detailed description of the challenge you are experiencing:		