

GARY PATRICK SALON

Model Application

First Name: _____

Last Name: _____

Phone Number: _____

Address: _____

E-Mail: _____

Date of Birth: _____

Hair Length: _____

Hair Type (straight, wavy, curly, etc.): _____

Hair Density (Fine, Medium, Thick): _____

Your Natural Hair Color? _____

Current Hair Color: _____

Is Your Hair Chemically Treated (Single Color, Highlights, Perm, Chemically Straightened): _____

Describe Your Hair Condition (Healthy, Dry, Oily, Damaged): _____

What are you hoping to have done? _____

Are You Open To A New Look? _____

Have You Ever Been A Model For Class Before? If Yes, For Which Class? _____

What Dates Are You Available? _____