

Goddess Glow 599 Peel Street Tamworth, NSW 2430 Australia

After Care Service Warranty

YOUR CONTACT DETAILS Contact Number: 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 extension: 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 or Jacuzzi or the ocean? 5. Do you brush your hair daily from roots to end? Which brush do you use?

6. Do you apply Serum when brushing your hair and how often?

7. Please tick the box if you have read our After Care Card - []
8. Please provide a detailed description of the challenge you are experiencing:
Signed: Date: / /
Please print name:
Address: