

# CUSTOMER PROFILE

Name \_\_\_\_\_

Email \_\_\_\_\_

Number \_\_\_\_\_ Call / Text

Skin Type

Oily/Combination     Normal/Dry

Skin Tone

Very Light     Light to Medium     Medium to Deep

Deep     Very Deep

Eye Color

Blue     Brown     Green

Facial Date \_\_\_\_\_  Virtual     In Person

Samples Ordered     Samples Received     Booked     Confirmed

Attended

Address \_\_\_\_\_

\_\_\_\_\_

Follow the  
Golden Rule

