



Tenant Application

Name: \_\_\_\_\_ cell # \_\_\_\_\_ Text Y / N

Address (city, zip): \_\_\_\_\_

Email: \_\_\_\_\_

Salon Profession: \_\_\_\_\_  
(hairstylist, nail technician, massage therapist, etc)

Part Time (< 20 hours) \_\_\_\_\_

Full Time (>20 hours) \_\_\_\_\_

**Services Provided:**

Haircut/Style \$ \_\_\_\_\_

Color Retouch \$ \_\_\_\_\_

Partial Hi/Lowlite \$ \_\_\_\_\_

Full Hi/Lowlite \$ \_\_\_\_\_

Formal Style Updo \$ \_\_\_\_\_

**Other:**

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Retail Products: Y / N

Current Web Presence Y / N

Business Cards: Y / N

Brochure Menu: Y / N

**Studio Style:**

Single \_\_\_\_\_

Double \_\_\_\_\_

Triple \_\_\_\_\_

Partner (s) Name (s) \_\_\_\_\_

\_\_\_\_\_

