

customer / salon _____

order no. _____

client's name _____

date _____

previous order no. _____

top priority production yes no

amount of units ordered 1 pc. 2 pcs. ___ pcs.

mold enclosed yes no

measurement (length x width) _____ x _____ cm

enclosed

mold

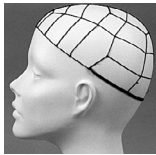
cap for ventilation

sample unit client gfh

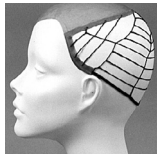
hair sample client gfh

hair enclosed client gfh _____ g

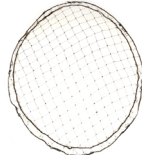
1 | BASES



LIGHT VOL.



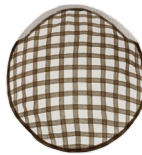
COMBI 9139



MICRO VOL.



MICRO VOL. MONO



MEDILACE



OPTIMA R

2 | SIZE

circumference _____ cm

length _____ cm

width _____ cm

3 | GRID SIZE

7 x 7 mm 15 x 15 mm

5 x 5 mm 12 x 12 mm

10 x 10 mm 20 x 20 mm

_____ x _____ mm

4 | NET MATERIAL

german mono

polyester PB 6

nylon (micro volume)

polyester PB 4

medilace 5 mm

medilace 10 mm

5 | TYPE OF BINDING

Lace Front: _____ mm

PU-width: _____ mm

medilace ribbon: 5 mm

medilace ribbon: 10 mm

hand crochet / fold

6 | PART/CROWN WITH

NB2

skin (PU)

with medilace underlayer

DF-Part / F-Part

7 | STYLE

part	crown	break	freestyle	brush back
<input type="checkbox"/> left <input type="checkbox"/> right <input type="checkbox"/> middle 	<input type="checkbox"/> left <input type="checkbox"/> right <input type="checkbox"/> middle 	<input type="checkbox"/> left <input type="checkbox"/> right <input type="checkbox"/> middle 	<input type="checkbox"/> with bangs 	<input type="checkbox"/> brush back lift / freestyle <input type="checkbox"/> brush back

7 | HAIR QUALITY

european hair remy hair human hair synthetic fiber

grey hair to be: human hair synthetic heat resistant

9 | DENSITY

	%	front	top	top II	temples	sides	back
ext. light	60%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
light	80%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
med./light	90%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
medium	100%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
heavy	120%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
very heavy	150%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10 | UNDERLOOPING

yes no front only all around

color: _____ number of rows: _____

12 | HAIR LENGTH

cm	front	top	sides	back
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13 | SPECIAL INSTRUCTIONS

8 | COLOR

	front	top	sides	back
hair color #	_____			
additional color #	%	%	%	%
spot color # / spot Ø	%	%	%	%

spots see mold

according to color ring _____

according to hair sample _____

11 | CURLING

	front	top	top II	sides	back
15 mm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 mm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26-28 mm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32-35 mm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40 mm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

chemical curl

water curl

no curling

cut all ends short _____ mm

cap for approval

hair for approval

hair to follow

clips:

pcs: _____

color: _____

size: _____