



### Esthetics Client Consultation Form

Be assured that all information given in this form will be held in confidence

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone (Home or Cell) \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
In Emergency notify: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

#### **Skincare**

Have you ever had a professional facial before? Y N

If yes, date of last facial? \_\_\_\_\_

What is your primary goal for the service(s) you'll be having today? \_\_\_\_\_

Skin Type (please circle): **Dry Oily Normal Combo**

- I Very pale complexion, does not tan, always burns
- II Pale complexion, tans lightly, always burns
- III Light creamy complexion, tans gradually, burns moderately
- IV Light to medium complexion, always tans well, burns seldom
- V Medium, olive or Brown complexion, deep tan, rarely burns
- VI Dark Brown to Black complexion, deeply pigmented, never burns

How do you feel about your skin's condition now? \_\_\_\_\_

Do you have any special skin concerns or problems? Y N

Do you use any products containing alpha-hydroxy? Y N

Have you ever received chemical peels services? Y N

Have you ever received microdermabrasion services? Y N

Are you currently seeing a dermatologist? Y N

If yes, for what purpose? \_\_\_\_\_

Are you currently using any type of acne medication such as antibiotics, Accutane, Retin-A, Adapalene Hydroxy acid, Ronova or another vitamin A derivative topically or orally in the last 6 months? Y N If so, which and how often?

Please list any known allergies or skin irritations: \_\_\_\_\_

Have you recently had any collagen/Botox injection or implants? Y N

Have you used any self tanning lotions, creams or treatments recently? Y N

White/blackheads	Y N	Uneven skin tone	Y N
Excessive redness	Y N	Sunspot/Hyperpigmentation	Y N
Flaking/Peeling	Y N	Wrinkles/Fine lines	Y N
Excessive oil/shine	Y N	Dull/Dry skin	Y N
Rosacea	Y N	Sun damage	Y N
Broken Capillaries	Y N	Dehydrated	Y N
Thick, raised scars	Y N	Bruise/mark easily	Y N
Redness/ruddiness	Y N	Other: _____	Y N

#### **Oasis by Plush Policy Agreement:**

*Oasis by Plush is committed to providing all our clients with exceptional service. When a client cancels without giving enough notice, they prevent another client from getting serviced.*

Please call us at (614) 641-7164

#### **72 hours prior to your scheduled appointment**

to notify us of any changes or cancellations.

If prior notification is not given, you will be charged 50% of the service cost.

#### **No Show:**

You will be charged 100% of the service cost for the missed appointment.

#### **Package Policy:**

All packages are final sale. Packages cannot be refunded for any reason.

#### **Lash Extensions / Eyebrow Microblading:**

A \$25 (non-refundable) consultation is required before full set application.  
(refundable for lash clients only if allergic reaction occurs)

#### **Children:**

To ensure the best and most relaxing spa experience, please leave your little ones at home. Our Oasis is a quiet space that is reserved for clients with scheduled appointments

Signature: \_\_\_\_\_ Print \_\_\_\_\_

Date: \_\_\_\_\_

By signing I acknowledge the acceptance of the Terms and Conditions. I authorize Oasis by Plush of Plush Brands LLC to charge my card on file for agreed upon cancellation policies. I understand that my information will be saved to file and will not be shared outside of named business for any reason. I also agree to waive any charge-back rights. I agree to notify the business in writing of any changes in my bank account information.