CLIENT CARD · NAIL STYLING

Card opened on: _____
Card no.: _____

1. Client details

Full name	
Phone	
E-mail	

2. Interview before the treatment

Question	YES	NO	Notes
Allergies, incl. to acrylates (gels, gel polishes), latex			
Changes on the nail plate or the skin of hands and feet (fungus, psoriasis, warts)			
Diabetes, clotting disorders, medications			
Pregnancy or breastfeeding			
Cuts, inflammation of the nail folds			
Previous treatments: reactions, chipping, onycholysis			

3. Nail plate condition and preferences

Plate condition:

□ healthy	□ brittle	□ splitting
□ onycholysis	□ overgrown cuticles	□ other: _____

System	□ classic manicure □ gel polish □ gel □ acrylic □ acrygel
Shape and length	
Favourite colours, styles	

4. Visit log

Date	Service	System, colours (no.)	Plate condition, notes	Signature

5. Client's consents

- ☐ I consent to the processing of my personal data for the purpose of keeping treatment documentation and booking visits (art. 6(1)(a) and (b) GDPR).
- ☐ I give my explicit consent to the processing of the health data from this interview, for the purpose of performing the service safely (art. 9(2)(a) GDPR).
- ☐ I have been informed that in case of disease-related changes on the nail plate the treatment may be stopped and a medical consultation is recommended.
- ☐ I consent to photos of the styling and their use in the salon's materials (optional).

Date and client's signature: _____ Employee's signature: _____

Client card template prepared by Altegio (alteg.io) for salon use. Data controller: salon name and address: _____. Keep the electronic version of the card in Altegio: client card, notes and visit history in one place.