## **Tress Transformations Client Information and Head Measurement Sheet**

## **Point of Contact Information**

Name	
Phone Number	
Email	
Mailing Address	

Wig Recipient Contact Information (if different from above)

Name	
Wig Recipient's	
Relation to You	
Phone Number	
Mailing Address	
Email	
Contact Request	Would you like us to CC the wig recipient on emails? <b>Circle</b> : Yes or No
Reference Pictures	Please email us 1-2 reference pictures of the wig recipient if you have not already done so

## Wig Recipient's Head Measurements

Head Circumference	
Hairline to the Nape of the Neck	
Ear to Ear Across the Forehead	
Ear to Ear Over the Top of the Head	
Temple to Temple Around the Back	
Nape of the Neck	

## This section to be filled out by Tress Transformations only

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Weight Submitted:
Length Submitted:
Gallery: 10-11, 12-13, 14-15, 16-17, 18-19, 20, 21 & up

For successful delivery, please address your package in the following format:

Tress Transformations 15532 SW Pacific Hwy C1B #506 Tigard, OR 97224

Our address accepts all mail carriers and has authorization for signature delivery if desired.