



**HOMESTEAD COMMUNITY  
HAIR STYLIST, BARBER & MANICURE  
PREFERENCE SELECTIONS**



RESIDENT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

FAMILY MEMBER: \_\_\_\_\_ PHONE: \_\_\_\_\_

**HAIR STYLIST PREFERENCES**

SELECTION	FREQUENCY – Circle one below	COMMENTS / REQUESTS
Wash	Weekly Bi-Weekly Monthly	
Set	Weekly Bi-Weekly Monthly	
Cut	Indicate Frequency:	
Perm	Indicate Frequency:	
Color	Indicate Frequency:	

**MANICURE PREFERENCES**

FREQUENCY – Circle one below	COMMENTS / REQUESTS
Bi-Weekly Monthly	
CARE AIDES ONLY	NO CHARGE

Original in record;  
Copies to: Homestead Activities, Hairdresser