BLOGO
SALON + MEDSPA

*Reservation Form for _____Party (Please email form to info@blogosalonmedspa.com at least 8 weeks in advance to help insure availability) *If you are requesting multiple service dates for the same client, please complete a line for each service date*

Client Name	Email Address	Cell Phone	Date of Service*	Time of Day for Service	Services Requested	Time to Complete Service (internal use)	Service Providers Name (internal use)	Specific Requests for Stylist/Artist	Price (internal use)