

Custom Order Form

561-697-9494 | 800-359-4247 | fax 561-697-4944

Date _____
 Company _____ Address _____
 City _____ State _____ Zip _____
 Phone _____ Email _____

Office Use Only

Processed by: _____ Date Received: _____
 F: _____ Size: W _____ L _____
 Acct. _____

Unit Specifications:

- Unit Cost Plus these upgrades \$ _____
- Hair Type \$ _____
- Hair Length \$ _____
- Colorless Rooting \$ _____
- Extra Hair \$ _____
- Gray Type \$ _____
- Extra Density \$ _____
- Misc \$ _____

Use CC On File _____ Check# _____ Less Deposit \$ _____ Total Cost \$ _____

Order Number (Office Use Only) _____ Qty. of Pcs. _____ Designed For (please print) _____ Imprint Name & Date

Base Type

<input type="checkbox"/> Quantum 1	<input type="checkbox"/> Pentagon	<input type="checkbox"/> Elite M Icon 6 Plus	Other Materials	Base Material Color		
<input type="checkbox"/> Quantum 2	<input type="checkbox"/> Pentagon II	<input type="checkbox"/> Elite M Quantum 6 Plus			<input type="checkbox"/> Fine Mono	<input type="checkbox"/> Same As Stock
<input type="checkbox"/> Quantum 3	<input type="checkbox"/> Spectragon	<input type="checkbox"/> The Iconic			<input type="checkbox"/> Super Fine Mono	<input type="checkbox"/> Flesh
<input type="checkbox"/> Quantum 5	<input type="checkbox"/> Paragon 1	<input type="checkbox"/> XTS Epic			<input type="checkbox"/> Fine Welded Mono	<input type="checkbox"/> Bleached
<input type="checkbox"/> Quantum 6*	<input type="checkbox"/> Paragon 2	<input type="checkbox"/> Paragon Epic			<input type="checkbox"/> Welded Mono	<input type="checkbox"/> Beige
<input type="checkbox"/> Quantum 7	<input type="checkbox"/> Paragon 3	<input type="checkbox"/> Swiss+			<input type="checkbox"/> French Lace	<input type="checkbox"/> Brown
<input type="checkbox"/> Quantum 8	<input type="checkbox"/> Polygraft 2*	<input type="checkbox"/> Swiss+ II			<input type="checkbox"/> German PE Net	<input type="checkbox"/> Light Pink
<input type="checkbox"/> MGM	<input type="checkbox"/> FL Polygraft 2				<input type="checkbox"/> Super Fine	<input type="checkbox"/> Dark Pink
<input type="checkbox"/> Millennium	<input type="checkbox"/> Icon*	<input type="checkbox"/> Alexia			<input type="checkbox"/> Welded Mono	<input type="checkbox"/> Tan
<input type="checkbox"/> Headliner	<input type="checkbox"/> XTS	<input type="checkbox"/> Isabella			<input type="checkbox"/> Chinese Silk	<input type="checkbox"/> Orange-yellow
<input type="checkbox"/> Oscar	<input type="checkbox"/> Alex	<input type="checkbox"/> Kate	<input type="checkbox"/> Micro Mesh 2000	<input type="checkbox"/> Black		
<input type="checkbox"/> Geometrix 1	<input type="checkbox"/> NX-Gen Skin	<input type="checkbox"/> Kristen	<input type="checkbox"/> Swiss Lace	<input type="checkbox"/> Other _____		
<input type="checkbox"/> Geometrix 2	<input type="checkbox"/> NX-Gen Lace	<input type="checkbox"/> Shania				
<input type="checkbox"/> Geometrix 5	<input type="checkbox"/> XT3	<input type="checkbox"/> Cannes				
<input type="checkbox"/> Geometrix 6	<input type="checkbox"/> H Boss	<input type="checkbox"/> Monaco				
<input type="checkbox"/> Octagon	<input type="checkbox"/> Elite M XTS Plus	<input type="checkbox"/> Cathy				
		<input type="checkbox"/> Celine				
		<input type="checkbox"/> Victoria				
		<input type="checkbox"/> Paris I				
		<input type="checkbox"/> Paris II				
		<input type="checkbox"/> Vera				
		<input type="checkbox"/> Vogue				
		<input type="checkbox"/> Voltage				

Base # _____
 * System is available for men & women, please specify which option

E-Z Caps

Refer to E-Z Caps Guideline
(Select Only One Contour and One Recession)

Contour 1	Contour 2	Contour 3	Contour 4	Contour 5	Contour 6	Contour 7	Recession
<input type="checkbox"/> 57-1	<input type="checkbox"/> 57-2	<input type="checkbox"/> 57-3	<input type="checkbox"/> 69-4	<input type="checkbox"/> 69-5	<input type="checkbox"/> 810-6	<input type="checkbox"/> 810-7	<input type="checkbox"/> R-1
<input type="checkbox"/> 68-1	<input type="checkbox"/> 68-2	<input type="checkbox"/> 68-3	<input type="checkbox"/> 79-4	<input type="checkbox"/> 79-5			<input type="checkbox"/> R-2
<input type="checkbox"/> 69-1	<input type="checkbox"/> 69-2	<input type="checkbox"/> 69-3	<input type="checkbox"/> 810-4	<input type="checkbox"/> 810-5			<input type="checkbox"/> R-3
<input type="checkbox"/> 79-1	<input type="checkbox"/> 79-2	<input type="checkbox"/> 79-3					<input type="checkbox"/> Same As Contour
<input type="checkbox"/> 810-1	<input type="checkbox"/> 810-2	<input type="checkbox"/> 810-3					
<input type="checkbox"/> 5575							
<input type="checkbox"/> 6585							
<input type="checkbox"/> 7595							

Width: Add/Subtract _____" Length: Add/Subtract _____"

Base size if not including a pattern or using EZ Caps: W _____ L _____

Style

<input type="checkbox"/> Left Crown	<input type="checkbox"/> Right Crown	<input type="checkbox"/> Center Crown	<input type="checkbox"/> Left Part	<input type="checkbox"/> Right Part	<input type="checkbox"/> Center Part	<input type="checkbox"/> Left 1/2 Part	<input type="checkbox"/> Right 1/2 Part	<input type="checkbox"/> Pompadour	<input type="checkbox"/> Freestyle (Same as Stock)	<input type="checkbox"/> Other
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Waves & Curls

*Note: No GUARANTEES or REFUNDS for factory chemical perms

	Front	Top	Crown	Back	Sides	Temples
Afro Wave 2-4 mm						
Light Wave 26 mm						
Slight Wave 32 mm						
Straight 36 mm						
Same As Stock						
Other						

Hair Density

Density	%	Front Edge	Front	Top	Crown	Back	Sides	Temples
Extra Light	80%							
Light	100%							
Light/Medium	115%							
Medium	130%							
Medium/Heavy	150%							
Other								

Same As Stock Model: _____

*Note: If ordering medium/heavy density or more, extra charges will apply.

Hair Length

	Front	Top	Crown	Back	Sides
<input type="checkbox"/> Same As Stock					

Extra Charge After 6" _____

Total % of Gray Extra % of Gray

Hair Type

Human Hair				Synthetic Hair			Gray Hair Selection	
Regular	Remy Plus (EXTRA CHARGE)	Cuticle (EXTRA CHARGE)	European (EXTRA CHARGE)	Synthetic Fiber	High Heat (EXTRA CHARGE)	Biolon (EXTRA CHARGE)		
_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %		

Yak - Up to 6"
 Human - Up to 6"
 CWH - Up to 6"
 Synthetic
 Biolon/High Heat

Hair Color Distribution

Gray	Front 1	Top 2	Crown 3	Back 4	Left Side 5	Left Temple 6	Right Side 7	Right Temple 8
_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %

If using color #s for highlights, specify color ring _____

New Image Stock Human Ring New Image Stock Synthetic Ring E-Z-Order Ring New Image New Club W Ring Other _____

Size of Spots 1/8" 1/4" 1/2" Other _____" Spacing Between _____" Marked on mold

Highlights	Front 1	Top 2	Crown 3	Back 4	Left Side 5	Left Temple 6	Right Side 7	Right Temple 8
<input type="checkbox"/> Regular Blended Spot Highlights	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %

If using color #s for basic colors, specify color ring _____

New Image Stock Human Ring New Image Stock Synthetic Ring E-Z-Order Ring New Image New Club W Ring Other _____

Base Color	Front 1	Top 2	Crown 3	Back 4	Left Side 5	Left Temple 6	Right Side 7	Right Temple 8
_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %	_____ %

*Note: If submitting more than one sample, label samples A, B, C, etc. And show letters in blocks above. Fill in all blocks. # of Hair Samples Attached _____

Type Of Binding

Size/Width: Specify in allocated space below.

Same As Stock <input type="checkbox"/>	Temple To Temple		All Around
	Front	Back	
P.U. Coat			
Skin			
Skin With Silk			
Mono Ribbon			
Cloth Ribbon			
Other			

Width Of Lace Fronts

1/8" 1/4" 1/2" 3/4" 1" Other _____"

Extended Lace/Skin Front Without Hair _____"

PU Thickness

Thin (g-5) Medium (g-8) Thick (g-12) Other _____

Undervent Front Only All Around Temple to Temple Back

Density Light Medium

Colorless Rooting (only if ordering lace) Front Only (EXTRA CHARGE)

1/2 Unit (EXTRA CHARGE) Whole Unit (EXTRA CHARGE)

Enclose Extra Hair (EXTRA CHARGE) 1 oz 2 oz

Available only for orders with 6" in finished hair length or less

Scalloped Front # _____

Circumference: A: _____
 B: _____
 Front to back: C: _____
 Ear to ear-over top: D: _____
 Nape: E: _____

Special Instructions