



**A Cut Above The Rest
Salon Services**

Resident Name: _____ Date: _____

Room Number: _____

MEN	Weekly	Bi-Weekly	Monthly
Haircut: \$15	_____	_____	_____
Shampoo: \$5	_____	_____	_____
Beard Trim or Shave: \$10	_____	_____	_____
Mustache Trim: \$5	_____	_____	_____
 WOMEN			
Haircut: \$15	_____	_____	_____
Haircut & Style: \$30	_____	_____	_____
Shampoo & Style: \$18	_____	_____	_____
Shampoo Only: \$7	_____	_____	_____
Rinse: \$3	_____	_____	_____
Perm/Haircut/Style: \$60	_____	_____	_____
Color Only: \$30	_____	_____	_____
Manicure: \$18	_____	_____	_____
Nail Trim & File: \$12	_____	_____	_____
Pedicure: \$40	_____	_____	_____