## Spa Esoteric Hints & Wishes

Data

Your name:	Address:	
City:	State:	Zip:
Contact Phone Number		
Contact Phone Number: Your email address:		······
Who should we contact?		
Full Name:	Address:	
City:	State:	Zip:
Contact Phone Number:		
Email address:		
Would you like this for a special occas		
(Please complete the desired occasio	n below)	
Birthday—Date:		
Anniversary–Date:		
Christmas/Hanukkah:		
Mothers/Fathers Day:		
Valentinés Day:		
Utner—Date:		
Other—Date:		
Services and treatments or retail you	ı would like:	
Or A Spa Esoteric Gift Card (\$50. to \$500 in \$50)		ount-\$
Check our website: <u>www.spaesoteric.</u> Facials, Massage, Body Treatments, I items to customize your Special Occa	Manicure, Pedicure,	ecials, Day spa packages, , Hair Services or retail

Down load form and use all year long....one form per client We will be happy to ship..... Complementary!

\*\*\*Any information you supply to us will be held in the strictest confidence and used solely by Spa Esoteric. We will not share your information with anyone....\*\*\*

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