



ascend salon

Ascend Salon's Safe Visit Protocol

Name of client: _____

Date: _____

Email: _____

Cell Phone: _____

1.) Do you have a fever, new cough or sore throat:

a. Yes - sorry, we can't perform your service today

b. No

2.) Are you currently awaiting covid-19 test results?

a. Yes – sorry, we can't perform your service today

b. No

3.) Have you knowingly been exposed to anyone with covid-19 symptoms in the last 14 days?

a. Yes – sorry, we can't perform your service today

b. no

4.) Have you traveled (or had guests arrive from) outside of Canada in the last 14 days?

a. Yes – sorry, we can't perform your service today

b. No

Thank you for your cooperation. This sheet is to ensure that everyone remains safe, and is an extra precaution to be able to track who has come into the salon, and when.