EAST COAST SALON SERVICES
CUSTOMER DIRECT
SALON RETAIL FULFILLMENT PROGRAM

# ORDER FORM

**After completing the form, please click "Submit Form" OR save as PDF and email to customerdirect@eastcoastsalon.com**

SALON NAME: _____

SALON ECSS CUSTOMER #: _____

SHIP TO (NAME): _____

SHIPPING ADDRESS: _____

_____

- Please have your customers visit eastcoastsalon.com for product information and availability. MSRP displays on product pages when not logged in with a professional account.
- Minimum $50 (Retail Value) Order Required.
- Maximum Qty of 3 Allowed for Each Item.
- $8.95 Flat Rate Shipping Fee will be added to each order total.

| QTY | ECSS ITEM # | PRODUCT NAME/SIZE |
|---|---|---|
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |
| Select QTY | | |

**ECSS will not be responsible for processing any returns direct from customers. Our normal return policies will apply for salons.**

Please check your email draft folder to confirm that your form has been sent to customerdirect@eastcoastsalon.com