

Custom Perfume & Fragrance Consultation

Name:

Phone number:

Part 1:

Your Fragrance Preferences:

Describe the qualities you are looking for in a fragrance (i.e.:freshness, sensuality, relaxing, romantic, boldness, classic, refined, etc.)

Is this for an individual or for is this for a business?

How would you describe your "ideal" fragrance? – use any adjectives that comes to mind, including terms that are not strictly related to the perfume world (i.e. colors, textures, sounds and music, emotions, **memories**, etc.).

When do you usually wear fragrance (i.e. - all day long, only on special occasions, evening, etc.)?

List all of your favorite scents: this can be anything from fragrant foods to smells found in nature- or any specific perfume & fragrance notes that you are truly passionate about- even (and especially) if odd or unusual!

Which perfumes/colognes and fragrant products (including body products such as soap, lotion, shower gel, after-shave, etc.) do you usually wear and/or prefer?

Specify the name and concentration of the perfume or product.

In the same manner, tell me which notes/scents you do not like at all, and would not want to wear or use.

Do you prefer to spray or dab your perfumes? Do you like using perfume oils (usually packed in a roll-on bottle) or solid (crème) perfumes? Do you prefer body or room sprays?

What is your zodiac sign?

What is your date of birth (year is optional...)

Briefly describe your personality.

Favorite season?

Favorite music/artists/type of art?

What do you want your personalized scent to say about you?

Is this scent intended for a special occasion or event, such as a wedding, anniversary, birthday etc?

Would you like any spiritual or physical properties incorporated into your scent formulation via aromatherapy or traditional uses of particular fragrances and substances?

What mood and feelings do you want your scent to evoke?

What color or musical note would your scent be?

Would you prefer a more feminine, masculine or unisex fragrance?

Is your scent louder or softer?

What are you passionate about?

Part 2: The following questions will help me to know how concentrated your fragrance should be:

Personal use:

What is your skin type (normal/oily/dry/combo)?

What is the color of your hair and eyes, naturally?

Do you eat a lot of spicy food? Do you prefer sweet, savory, spicy, sour, umami, bitter or astringent types of tastes?

Does your diet include a lot of fresh fruit and vegetables?

Generally speaking, does perfume last for a long time on your skin?

Have you any known allergies? Please explain in detail.

Business use:

Would you prefer this to be a subtle or stronger ambient fragrance?

What are your target applications for this fragrance? For example, personal care product line, private label fragrance line, signature scent for business space only, candles, aromatherapy uses for patrons and employees?

If used environmentally in a room space, are there any strong or competing fragrances or odors to note? For example, if your business is located in close proximity to a food establishment or something similarly loud, fragrance wise. If so, is this something you hope to neutralize, enhance or otherwise transform?

Please feel free to add any and as much additional information as you like that will help me understand what your personal tastes and fragrance preferences are.