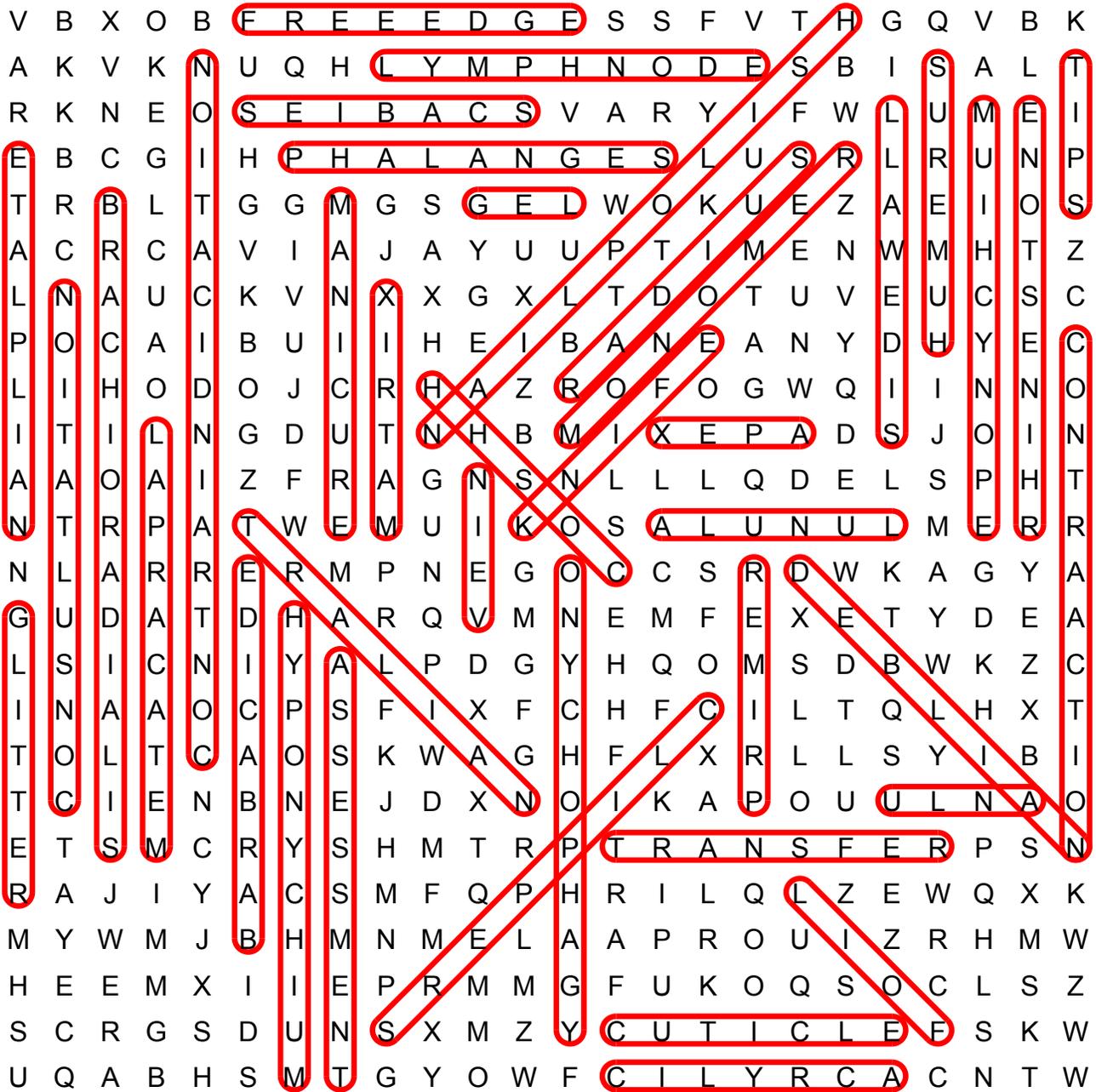


Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Nail Services



contraindication  
 hyponychium  
 metacarpal  
 transfer  
 sidewall  
 glitter  
 radius  
 apex

brachioradialis  
 nailpolish  
 lymphnode  
 nail bed  
 nailart  
 humerus  
 matrix  
 tips

contraction  
 assessment  
 nailplate  
 freeedge  
 scabies  
 cuticle  
 coshh  
 foil

consultation  
 rhinestone  
 phalanges  
 clippers  
 acrylic  
 primer  
 knife  
 ulna

onychophagy  
 eponychium  
 barbicide  
 manicure  
 monomer  
 lunula  
 vein  
 gel