Hair Salon Consent & Release Form

The Service

I am requesting a chemical hair service from , which may include hair color, highlights, balayage, lightening or bleach, toner, color correction, permanent waves, relaxers, keratin or other smoothing treatments, or related services (the "Service").

Hair History

I confirm that I have told my stylist truthfully about my hair history, including:

- box dye, henna, color-depositing products or metallic dyes used in the past two years;
- previous lightening, perms, relaxers, keratin or smoothing treatments;
- hair extensions, and any recent hair loss, breakage or damage; and
- any service I had at another salon in the past six months.

I understand that inaccurate or incomplete hair history can cause unexpected results, breakage or damage, and that is not responsible for results caused by information I did not disclose.

Health and Allergies

I confirm that I have disclosed any of the following that apply to me:

- allergies to hair dye, PPD, ammonia, latex, fragrances or other chemicals;
- previous reactions to hair color, including black henna tattoos;
- scalp conditions such as psoriasis, eczema, cuts, sores or sunburn;
- pregnancy or breastfeeding; and
- medications or treatments that affect my skin or hair.

Patch Test and Strand Test

 has offered me a patch test before color services and, where appropriate, a strand test before lightening or chemical services. I understand that these tests reduce but do not remove the risk of a reaction or damage, and that an allergy can develop even after previous services without problems. If I declined a test, I accept the additional risk.

Risks

I understand that chemical hair services may cause:

- an allergic reaction, including itching, redness, swelling or rash on the scalp, face or neck, which may need medical treatment;
- scalp irritation, sensitivity or chemical burns;
- dryness, breakage, change in texture or hair loss, especially on previously treated or fragile hair;
- color that differs from the reference photo or fades faster than expected; and
- eye or breathing irritation from fumes, including formaldehyde released by some smoothing treatments when heated.

If I feel burning or discomfort during the Service, I will tell my stylist immediately.

Results

I understand that the final result depends on my natural hair, hair history and condition, and that reference photos are a guide, not a promise. Major changes such as going much lighter or correcting previous color may require several appointments. My stylist may stop or change the Service to protect the condition of my hair. does not guarantee any particular color, shade or result.

Aftercare and Adjustments

I have received aftercare recommendations and agree to follow them. If I am unhappy with the result, I will contact within the period set by its redo policy so the salon can assess and, where appropriate, adjust the Service. Adjustments needed because I did not follow aftercare advice may be charged.

Age

I confirm that I am at least 18 years old, or that my parent or legal guardian has signed this form on my behalf.

Release

I voluntarily accept the risks of the Service. To the fullest extent permitted by law, I release , its owners and stylists from claims arising from the Service, including allergic reactions, hair damage and color results, except claims caused by gross negligence or willful misconduct.

Photos

I agree that may take before and after photos for my client record. Photos will only be used for marketing if I give separate permission.

Please initial each statement

___ I have given an accurate hair history, including box dye, henna and previous chemical services.

___ I have disclosed all allergies, scalp conditions and previous reactions to hair dye.

___ I was offered a patch test and strand test and understand that a reaction or damage is still possible.

___ I understand that results vary and that major changes may need more than one appointment.

___ I release {{business}} from liability as described in this form, to the extent permitted by law.

Participant full name

Date

Phone

Email

Signature