Tattoo Consent & Release Form

The Procedure

I am requesting that and its artist apply a tattoo to my body. I understand that tattooing involves the use of needles to insert ink or pigment into the dermal layer of the skin, and that the procedure will cause some pain, bleeding and swelling. I understand that a tattoo is intended to be permanent and that removal, if possible at all, can be expensive, painful, require multiple sessions and may leave scarring or discoloration.

My Health

I confirm that I have disclosed any of the following that apply to me, and that I have answered all health questions truthfully:

- diabetes, epilepsy, hemophilia or another bleeding disorder;
- heart conditions, or use of blood thinners such as aspirin or warfarin;
- skin conditions such as eczema, psoriasis, keloid scarring or a history of poor wound healing;
- allergies to latex, metals, inks, dyes, ointments or soaps;
- pregnancy or breastfeeding;
- a weakened immune system, communicable disease or current infection; and
- recent use of isotretinoin (such as Accutane) or other medication that affects the skin.

I am not under the influence of alcohol or drugs. I have eaten in the last few hours. If I have a medical condition that may affect the procedure or healing, I have consulted, or I accept responsibility for not consulting, a physician before getting tattooed. The artist may decline or postpone the tattoo if they believe it is unsafe to continue.

Risks

I understand that, even with proper sterile technique, getting a tattoo carries risks, including:

- infection, which may require medical treatment;
- allergic reaction to pigments, which can appear immediately or months later;
- scarring, raised skin or keloid formation;
- ink spreading beneath the skin ("blowout"), fading, or uneven color;
- swelling and sensitivity, including during MRI scans; and
- fainting or lightheadedness during the procedure.

Design and Results

I have reviewed and approved the final design, size, placement, colors and spelling of any words or numbers. I understand that is not responsible for spelling or design errors I approved. I understand that colors may look different on my skin than on paper or a screen, that skin tone, age and sun exposure affect how a tattoo looks over time, and that does not guarantee any particular result. The artwork remains the creative work of the artist.

Aftercare

I have received aftercare instructions and agree to follow them. I understand that the tattoo may

take several weeks to heal and that my aftercare directly affects how it heals and looks. I will keep the area clean, avoid swimming pools, hot tubs, the ocean and direct sun during healing, and avoid picking or scratching. If I notice signs of infection, such as increasing redness, heat, pus, fever or red streaks, I will seek medical care promptly.

Touch-ups are offered under the studio's touch-up policy. Touch-ups needed because I did not follow aftercare instructions may be charged.

Deposits and Payment

I understand that deposits are applied to the final price and are non-refundable unless cancels or its posted policy says otherwise. I agree to pay the agreed price when the tattoo is complete. Because a tattoo cannot be returned, payment is not refundable once work has started.

Medical Emergency

If I feel unwell or have a medical emergency during the procedure, I authorize to provide first aid and call emergency services, and I accept responsibility for any resulting costs.

Age and Identity

I confirm that I am at least 18 years old, or the minimum age required where operates, and that the identification I have shown is genuine. If I am a minor permitted to be tattooed under local law, my parent or legal guardian is present, has shown proof of identity and guardianship, and has signed this form.

Release

I voluntarily accept the risks of getting a tattoo. To the fullest extent permitted by law, I release , its owners, artists and staff from any claims for injury, illness, dissatisfaction or damage arising from the tattoo procedure or its healing, except claims caused by their gross negligence or willful misconduct. I agree that the studio may photograph the finished tattoo for its portfolio and social media, unless I tell the artist I do not want it shared.

Records

I understand that will keep this form and my identification details for as long as required by health regulations, and will keep them confidential except where disclosure is required by law or to a health inspector.

This consent is governed by the laws of the state or country in which operates. If any part is unenforceable, the rest remains in effect. An electronic signature on this form has the same effect as a handwritten one.

Please initial each statement

___ I am at least 18 years old, or meet the local minimum age with a parent or guardian present, and have shown valid photo ID.

___ I am not under the influence of alcohol or drugs and have disclosed all relevant health conditions.

___ I have approved the design, placement and spelling, and understand the tattoo is permanent.

___ I have received aftercare instructions and accept responsibility for following them.

___ I understand the risks, including infection and allergic reaction, and release {{business}} as

described.

Participant full name

Date

Date of birth

Phone

Email

Signature