

CONSENT TO APPLICATION OF TATTOO & RELEASE AND WAIVER OF ALL CLAIMS

I acknowledge by signing this waiver that I have been given the full opportunity to ask any and all questions I may have about obtaining a tattoo at Frazzle Kat Tattoos and that all of my questions have been answered to my full and total satisfaction. I specifically acknowledge that I have been advised of and agree to the following:

I acknowledge that it is not reasonably possible for the tattoo artist to determine whether I might have an allergic reaction to the dyes, pigments or processes used in my tattoo and I accept to take the risk that such a reaction is possible and to not hold Frazzle Kat Tattoos or the tattoo artist responsible for any allergic reaction, if it does occur.

I understand that the tattoo is considered a wound until the healing process is complete and agree to treat it as such, following the recommending aftercare procedure provided by my artist. I acknowledge that the aftercare information has been made available to be prior to this appointment.

I acknowledge that infection is always possible, particularly in the event that I do not take proper care of my tattoo. In no way do I hold Frazzle Kat Tattoos or the tattoo artist liable for any problems or expenses that may occur if infection does arise. I agree that if I suspect an infection I will seek medical attention and notify my artist.

I acknowledge that a tattoo is considered permanent, that it can only be removed by laser or surgical procedure and that any removal may result in permanent scarring and additional expenses.

I acknowledge that I have truthfully represented to the tattoo artist that I am at least 18 years of age.

I do not have a heart condition, epilepsy, or hemophilia, nor do I take any blood thinning medications, and I am not presently, nor have I been within the last 6 months infected with jaundice, hepatitis or HIV. I do not have any other medical or skin condition that may interfere with the application or healing of the tattoo. I am not on antibiotics, nor have I been in the past week. I am not on Accutane, nor have I been for the past 12 months. I am not pregnant or nursing.

I release all rights to any photos taken of my tattoo by the artist and give consent to their reproduction in print and electronic form. (If you do not agree to this provision please advise the artist at the beginning of your appointment and no photos will be taken.)

I acknowledge that the obtaining of my tattoo is my choice alone and I consent to the application of the tattoo.

I acknowledge that I am not under the influence of drugs and/or alcohol at the time the tattoo is administered.

I agree for myself my heirs, assigns and legal representatives to release and forever hold harmless Frazzle Kat Tattoos and the tattoo artist from any and all claims, damages or legal action arising from or connected in any way with the tattoo or the procedures and conduct used to apply my tattoo, in any and all places Frazzle Kat Tattoos and the tattoo artist conduct business.

CLIENT CONSENT:

SIGNATURE: _____

EMAIL: _____

NAME: _____

PHONE: _____

DATE: _____

PLEASE LIST AN EMERGENCY CONTACT:

NAME: _____

PHONE: _____

PLACEMENT OF TATTOO:

DESCRIPTION:

NEEDLE or CARTRIDGE

TUBE or 2nd CARTRIDGE

LOT #: _____ EXPIRY DATE: _____

LOT #: _____ EXPIRY DATE: _____

STERILIZATION METHOD: EO gas

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PRE-APPOINTMENT SAFETY MEASURES

All needles, tubes and cartridges are pre-sterilized, single use and disposed of safely following each procedure.

Tattoo bed, station, machine, power supply, power cord, light & other non-disposable items (bottles, etc) all sanitized with CaviCide or Pre-Empt surface disinfectant.

All counters, tables, doorknobs & sink taps sanitized. Bathroom is stocked and cleaned.

Hand sanitizer is available for clients in the tattoo room.

Snacks and beverages are available for all clients.

Multiple bandaging options are available for clients (adhesive and non-adhesive).

ARTIST NAME: Anna Matheson

DATE: _____

SIGNATURE: _____