

## Tattoo Consent Form

	Name:	Date:		
	Email:			
	Phone:	DOB:		
	Address:			
Are yo	you 18 yrs. or older?			
	☐ Yes			
	□ No			
Are yo	you under the influence of drugs or alcoho	ol?		
	☐ Yes			
	□ No			
	fully understand that these risks, know limited to: infection, scarring, difficult reactions to tattoo pigment, latex glove risks associated with getting a tattoo I application and freely accept and expretattooing.	ent risks associated with getting a tattoo. Therefore, on and unknown, can lead to injury including but no ies in the detection of melanoma and allergic es and/or soap. Having been informed of the potenti wish to proceed with the tattoo procedure and essly assume any and all risks that may arise from	ia	
	0 11	ortunity to ask any question about the procedure and questions, if any, have been answered to my total	d	
	understand and will follow them. I ack	on the care of my tattoo while it's healing. I nowledge that it is possible that the tattoo can ot follow instructions given to me. If any touch-up		

my own expense.  I do not suffer from diabetes, epilepsy, her thinning medication. I do not have any or with the procedure, application or healing or bone marrow transplant or, if I am, I h antibiotics that is required by my doctor tattooing or piercing. I am not pregnant of may affect my judgement in getting the tattoon of the me have provided to them or chosen from the	aning or spelling of the symbol or text that I		
actual tattoo when it is applied to my bood the clarity of my tattoo will fade due to us occurring dispersion of pigment under the A tattoo is a permanent change to my appropriate appropriate and the restoration of my skin to its or a result in the restoration of my skin to its or a release the right to any photographs take advance to their reproduction in print or initial this provision, please inform the Tayour completed tattoo).	ly. I also understand that over time, the colors and improtected exposure to the sun and the naturally e skin.  Dearance and can only be removed by laser or and/or costly and which in all likelihood will not exact appearance before being tattooed.  The electronic form of the tattoo and give consent in electronic form. (For assurance, if you do not attoo Studio NOT to take any pictures of you and ND policy on tattoos, piercing and/or retail sales		
	pove information and I give Grit Lounge tattoo me.		
Signature : Date:			
Artist Signature:	Date:		