

Brow lamination is a process of reconstructing the brow hairs to keep them in a desired shape. The tint is an optional service. Brow lamination lasts about 6-8 weeks; this will differ based on hair and skin type, and proper aftercare.

I UNDERSTAND THE FOLLOWING

- I understand brow lamination is a process of reconstructing the brow hairs to keep them in a desired shape, but it is my own responsibility to brush them daily to achieve the desired look, daily.
- I understand that after the treatment, the brows must stay dry for 48 hours.
- I understand experiencing some redness of the skin or mild sensitivity is normal but does not typically occur.

Brow Lamination is NOT recommended if you have the following:

- Psoriasis/severe eczema
- Alopecia
- Recent microblading (must be healed over 8 weeks)
- Sunburn
- Extremely sensitive skin
- Scar tissue in the treatment area
- Retinol, Accutane, AHA, BHA, etc.

I ACKNOWLEDGE AND ACCEPT THE FOLLOWING

- Despite the application of the most advanced and top ingredients, and in extremely rare cases, an allergic reaction is possible.
- It is my responsibility to advise the technician of current use of the following ingredients: Retin-A, AHA, BHA, or acne products.
- Use of any of the following products within the last 3-4 days may cause extreme redness, discomfort, and in rare cases, scabbing.
- When tint is applied, everyone's hair absorbs differently, and my final results may not be the color I initially wanted.
- There may be some residual staining left on skin following the tint and this will fade and go away within a short time.
- It is my responsibility to follow aftercare instructions provided by my technician.
- Failure to follow the aftercare instructions may cause an undesirable result.
- I release my technician and/or business establishment and/or anyone affiliated from all liability associated with this procedure, which is performed with the utmost attention to safety and proper application using tools and products that the technician has been professionally trained and certified to use.

By signing below, I certify that I have read and understand the above points and that I had sufficient opportunity to have all/any questions answered. I do not hold the technician and/or business establishment responsible for any conditions that were present prior to the treatment. I also consent to before/after photos, which may or may not be used for the purposes of advertising.

CLIENT NAME:

PHONE:

SIGNATURE:

DATE:
