LASH AND BROW SERVICES - LIFT, LAMINATION, AND TINT

Possible Medical Contraindications:

Alopecia Recent treatment in the area of service:

Conjunctivitis Microneedling
Eczema Chemical Peel
Psoriasis Dermaplainingg
Sensitive Eyes Dermabrasion

Watery Eyes Use of RETINOL/RETINOIDS

Dry Eyes Micro blading
Irritated / Itchy Eyes Micro shading
Skin Cancer Tattooing

Glaucoma Cataract Lupus

Recent Eye Infection/Injury

Prone to Stye

If you've had a lash lift, brow lamination or tint in the past and have either experienced an allergic reaction, or was not able to achieve desired results, please notify your esthetician prior to your service so we can adjust accordingly.

Sunburn

Lashes-

Please do not wear makeup (mascara) to your appointment.

This service CAN NOT be preformed on LASH EXTENSIONS.

Please do not use any lash extension serums at least 2 weeks prior to your service. If you wear contacts, please bring a something to place them in during your service.

Although every precaution will be taken to ensure my safety and wellbeing, I am aware of the following information and possible risks: Irritation to the orbital eye area, including the eye itself, and could result in stinging or burning, blurry vision and potentially blindness should the product enter into the eye. I understand that if product accidentally comes into contact with my eye, my eye will be flushed with water and medical attention may be required. I understand that some irritation, itching, or burning may occur to the SKIN which comes in contact with the product. I understand that there may be some residual dark staining left on the skin following

the tinting process of my lashes. This will fade and go away within a short time. I understand that, while every attempt will be made to provide me with my chosen color and lifting results, everyone's hair absorbs color and serums differently and my final results may not be exactly what I was expecting. I understand that over the course of several weeks, the tint and lift will gradually lighten, fade and dissolve. Re-tinting will be required to keep the new color fresh. Most clients need to re-tint every 3-4 weeks, lifting is every 4-6 weeks.

Brows-

Please do not use any brow extension serums at least 2 weeks prior to your service. We may not be able to preform a lamination/tint if you've recently been waxed, used retinol, or had an other minimally invasive service that could have affected the skin around your brows. Its imperative that you disclose this in your Client Consent form prior to your appointment. I understand that brow lamination is the process of restructuring the brow hairs to keep them in the desired shape, but it is my responsibility to brush my brows daily to maintain the desired look.

Although every precaution will be taken to ensure my safety, I am aware of the following information and possible risks: I understand that some irritation, itching, or burning may occur to the skin which comes in contact with the lamination/tinting agent. I understand that there may be some residual dark staining left on the skin following the tinting process of my brows. This will fade and go away within a short time. I understand that, while every attempt will be made to provide me with my chosen color and lifting results, everyone's hair absorbs color and serums differently and my final results may not be exactly what I was expecting. I understand that over the course of several weeks, the tint and lift will gradually lighten, fade and dissolve. Re-tinting will be required to keep the new color fresh. Most clients need to re-tint every 3-4 weeks, lamination is every 4-6 weeks.

Post-care BOTH:

Keep lift, lamination and tint DRY for at least 24 hours!
If your lashes are TO curly, please apply water to loosen the solution.
Continue to brush in the desired direction you want your hairs to 'fall' with wand given to you.

You may use makeup immediately after the service, but we suggest waiting at least 24 hours if possible.

CONSENT

I understand that it is imperative that I disclose all of the information requested on the Client Consent Form. I have cited all conditions and circumstances regarding my health history, medications, and any past reactions to products or medications. I understand that additional conditions could occur or be discovered during the procedure which could affect my ability to tolerate the procedure. I understand and agree to the after-care instructions provided by the technician. I realize and accept the consequences of failure to adhere to these instructions.