

COUTURE BROWS

ACADEMY ♥

TOOTH GEMS CONSENT FORM

Personal Information:

Full Name: _____

Date of Birth: _____

Phone Number: _____

Email Address: _____

Do you wear a retainer or Invisalign? (You may not be a good candidate for a tooth gem.)

Yes No

Do you have allergies to dental materials? Yes No

Do you have any artificial teeth? (Applying gem to artificial tooth may not adhere.)

Yes No

Tooth Gem Placement:

Tooth gems are recommended to be placed on your flattest teeth. The front 4 teeth on top and bottom generally have the best retention. K-9's are more vulnerable to falling off, as well as placements near the outer edges of the teeth.

Tooth Gem General Information & Care:

Tooth gems are non-invasive. The bonding agents are the same as used by orthodontists to bond braces to teeth. The bonding agents do not harm the enamel on the teeth. The gems used are 100% authentic Austrian Crystals, are lead-free, and body safe. Once the jewel is on, there may be some dental adhesive on the tooth surrounding the gem. This will remove over a couple of weeks with brushing.

Tooth gems can last anywhere from 3 weeks to 1 year. If you are ready to remove your gem before it naturally falls off, you can easily have it removed at your next professional dental cleaning routine. For best teeth whitening results, gem should be placed after whitening or removed before whitening.

Tooth Gem Replacement Guarantee:

Please note, gems are most vulnerable for the first 24hrs. Do not eat or drink for the first 2hrs as the gem is still curing. Do not brush for 12hrs. You can resume brushing regularly after 12hrs. If your tooth gem falls off within 2 weeks of the service we will replace it one time for free.

Eligibility: I understand that this treatment CANNOT be used by people under the age of 14, people with gum disease, open cavities, leaking fillings, or other dental conditions, or people with a known allergy to bonding

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agents. If I feel a sharp pain on a particular tooth during the treatment I should stop the treatment and contact my dentist since this could be a sign of an open cavity.

Removal of Tooth Gem

I understand that if I wish to remove the tooth gem in the future, it must be done professionally. The removal may involve the use of dental tools to safely take off the gem without damaging my tooth.

Age Requirement

I confirm that I am at least 18 years of age or have received parental/guardian consent to undergo the tooth gem application. (If under 18, please provide parental/guardian consent below.)

Photo Consent

I give my consent for photographs of my tooth gem(s) to be taken and used for documentation, promotional, or educational purposes, unless I indicate otherwise. YES NO

Liability Waiver

I understand that while every effort will be made to apply the tooth gem safely and correctly, the technician and the establishment are not liable for any complications, damage, or injury that may result from the application or removal of the tooth gem. This includes, but is not limited to, damage to the tooth or enamel, loosening of the gem, or any discomfort caused.

Informed Decision

By signing this consent form, I confirm that I have been fully informed about the procedure, risks, and aftercare for the tooth gem application. I have had an opportunity to ask questions and am satisfied with the information provided. I voluntarily consent to this procedure and understand the associated risks.

Parental/Guardian Consent (If Under 18):

I, the parent/guardian of the individual named above, give my consent for the application of a tooth gem to be performed. I understand the risks and responsibilities associated with the procedure.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Acknowledgement and Signature:

I hereby acknowledge that I have read, understood, and agree to the terms outlined in this consent form. By signing below, I consent to the application of the tooth gem and release the technician and the establishment from any liability as stated above.

Signature of Customer: _____

Date: _____