

Client Consent Form

- _____ 1. I agree to use only recommended products on my NOVALASH Eyelash Extensions.
- _____ 2. I understand that there are many variables including technician expertise, natural lash growth cycle, use of cosmetics and skin care products, and the overall maintenance given that will influence how long my NOVALASH Eyelash Extensions remain in place.
- _____ 3. I acknowledge that I should not pull on my lashes after they have been applied.
- _____ 4. I understand that if a NOVALASH Certified Lash Extensionist does not apply NOVALASH Eyelash Extensions properly there is a risk of eye damage and harm to my vision.
- _____ 5. I understand that, as with all cosmetic products, there is a potential possibility of allergic reaction.
- _____ 6. I have been advised that using mascara on a regular basis will shorten the length of time my extensions remain in place. I have also been advised not to use waterproof mascara on my NOVALASH Eyelash Extensions.
- _____ 7. I understand that touch-up appointments may be necessary as soon as two to three weeks after the applications and that there may be additional fees for this procedure.
- _____ 8. I hereby release any and all persons representing this salon from all claims, demands, damages, actions and cause of action arising out of the performance of the eyelash extension service.
- _____ 9. I consent to "before and after" photographs for the purpose of documentation, potential advertising, and promotional purposes.
- _____ 10. I have been given the option for a patch test. To rule out any seasonal/allergic reactions and sensitivities to the adhesive.

I hereby **Decline** / **Agree** to have a patch test performed (Please Circle and Initial)

I have read and discussed the above information with my NOVALASH Certified Lash Extensionist.

I, _____, authorize _____ to apply NOVALASH Eyelash Extensions to my lashes.

Client Signature

Date

NOVALASH Certified Lash Extensionist Signature

Date