

STATE OF FLORIDA DEPARTMENT OF HEALTH

Authority 381.00771, Florida Statute, and Chapter 64E-28, Florida Administrative Code Written Notarized Consent for Tattooing of a Minor

State of Florida				
County of				
Before me thisday of		,	20,	
Personally appeared(Name	- (D 1/0 1/			
who, under oath or affirmation, makes the fo	ollowing stat	^{an)} ements unde	er penalties of	perjury
I am the parent/guardian of	(Name of	f Minor)		,
a minor, whose date of birth is				
and I consent to the tattooing of	(Name o	of Minor)		's
(Description	on and Location	of Tattoo)		-
	(Signa	ture of Parent/Leg	gal Guardian)	
Sworn to/affirmed and subscribed before	e me this	d	lay of	
by, who is per	e me this	d vn to me or w	lay of	,
by, who is per	e me this	d	lay of	,
by, who is per	e me this	d vn to me or w	lay of ho presented dentification.	,
(Form of Identification)	e me this sonally knov as s	vn to me or w satisfactory io	lay of ho presented dentification.	
(Form of Identification)	e me this sonally knov as s	vn to me or w satisfactory io	lay of who presented dentification.	
by, who is per	e me this sonally knov as s	vn to me or w satisfactory io	lay of who presented dentification.	