**THE IVY - fine art & tattoo**

**Consent to the application of tattoo and release and waiver of all claims.**

1901 West Bay Dr., Suite #6, Largo, Fl., 33770 PHONE NUMBER PENDING

**PLEASE INITIAL EACH PARAGRAPH IN THE SPACES PROVIDED AFTER THOROUGHLY READING THIS CONSENT FORM, TO SHOW THAT YOU UNDERSTAND AND ACCEPT EACH PROVISION. PLEASE FEEL FREE TO ASK ANY QUESTIONS REGARDING THIS WAIVER.**

\_\_\_ I acknowledge by signing this consent form that I have been given the full opportunity to ask any and all questions I might have about obtaining a tattoo from THE IVY and that all of my questions have been answered to my full and total satisfaction. I specifically acknowledge that I have been advised of the facts and matters set forth below, and I agree as follows:
\_\_\_ I do not have diabetes, epilepsy, hepatitis, bleeding disorders, HIV or AIDS, Tuberculosis or any other communicable disease, a heart condition, or take medication which thins the blood. I am not pregnant. I am not under the influence of drugs or alcohol. I do not have medical or skin conditions such as, but not limited to: acne, scarring (keloid), eczema, psoriasis, freckles, moles, or sunburn in the area to be tattooed that may interfere with the application and or healing process of the tattoo.

\_\_\_ I acknowledge that I have truthfully represented to the employees, agents and representatives of THE IVY that I am over eighteen (18)years or old or, if under 18, I have signed and notarized parental or guardian consent **and** my parent or guardian is present during the procedure.
\_\_\_ I acknowledge that it is not reasonably possible for the representatives and employees of THE IVY to determine whether I might have an allergic reaction to the dyes, pigments or processes used in my tattoo, and I agree to accept the risk that such a reaction is possible.

\***List all allergies** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_ I acknowledge that infection is always possible as a result of obtaining a tattoo, **particularly in the event that I do not take proper care of my tattoo** and that I have received written and verbal instructions advising me of the proper care of my tattoo and I recognize the absolute necessity for following those instructions and that I agree that any touch-up work needed, due to my own negligence, will be done **at my own expense.**

\_\_\_ I acknowledge that variations in color and design may exist between any tattoo as selected by me and as ultimately applies to my body. I understand that brighter and lighter colored inks and pigments do not appear as brightly on darker skin as they do on lighter skin.

\_\_\_ If my tattoo contains or consists of text, symbols, or any other language other than English, the tattoo artists and owner of THE IVY are not responsible for what it may or may not mean and I acknowledge that it is my full responsibility to ensure that for the desired name(s), word(s), or phrase(s) the SPELLING, FONT TYPE AND FONT SIZE are correct and accurate and that it is my full responsibility to ensure that the placement of the tattoo(s) is correct and exactly where I desire it to be.

\_\_\_ I acknowledge that my tattoo may cause scarring and that the tattoo is a permanent change to my physical appearance and that the obtaining of my tattoo is by my choice alone and I consent to the application of the tattoo and to any actions or conduct of the employees of THE IVY reasonably performs the tattoo procedure.

\_\_\_ I agree to release and forever discharge and hold harmless THE IVY and its agents and employees from any and all claims, damages or legal actions arising from or connected in any way with my tattoo or the procedures and the conduct used to apply my tattoo.

 \_\_\_ I acknowledge that all tattoos on hands, including fingers, feet, and neck are not guaranteed. (If touch up is needed, you will be charged **$50** shop minimum)
\_\_\_ I acknowledge that there are no refunds and all deposits are non-refundable and that if for any reason I do not go through with or finish my tattoo, that any payment I have already made are non-refundable.

**\_\_\_** I agree to inform the manager or owner if an artist suggests a tattoo at a lesser price in exchange for a tip.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age:\_\_\_\_\_\_ Sex:\_\_\_\_\_ Phone:(\_\_\_\_\_)\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:(\_\_\_\_)\_\_\_\_\_\_-\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_

Emergency Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:(\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_

**Customer Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_/\_\_\_\_/\_\_\_\_**

**Print Artist Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Artist Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tattoo Information:**

**Description of tattoo:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Placement:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Side:** ( ) Left( )Right

**Customer must complete:** Price of tattoo **$**\_\_\_\_\_\_\_\_\_\_\_\_  **Artist Initials:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_