

Written Notarized Consent for Body Piercing of a Minor

Soulshine
6025 Taylor Road #102
Punta Gorda, FL 33950

County of _____

Before me this _____ Day of _____, 20_____.

Personally Appeared _____,
(Name of Parent/Guardian)

Who, Under oath or affirmation, makes the following statement under penalties of perjury:

I am the Parent/Legal Guardian of _____
(Name of Minor)

a minor, whose date of birth is _____, _____, _____
(Month) (Day) (Year)

And I consent to the body piercing of _____'s
(name of Minor)

(Name/Location of Piercing) Piercing.

I accept that I must be present at the time of the piercing if my child is under 16 years of age.

(Signature of Parent/Legal Guardian)

Sworn to/Affirmed and subscribed before me this _____ day of _____, 20_____.

By _____, Who is personally known to me or presented

_____ as satisfactory identification.
(Form of Identification)

Notary seal:

(Signature of Notary)

(Name of Notary type, stamped or printed)

I agree to release and forever discharge and hold harmless Soulshinepg LLC. or Nicole Barros from any and all claims, damages and legal actions arising from or connected in any way with his/her piercing, or with the procedure and/or conduct used during his/her piercing.

Office Use Only

(Printed name of Piercer) (Printed name of Licensed studio)

(Signature of Piercer)