



Name _____ Email _____

D.O.B _____ Phone _____ Emergency Contact _____

Address _____

How did you hear about Art + Body _____

All tools have undergone strict hygiene standards which are either in new pre-used condition or are sterile through having undergone autoclave (heat sterilization) to destroy all possible contaminants.

Health Declaration

- Have you been overseas in the last 14 days? Y/N
- Have you had any direct contact with anyone who has been overseas in the last 7 days? Y/N
- Have you experienced any flu-like symptoms in the last 14 days? Y/N
- Have you had any direct contact with anyone who has experienced any flu-like symptoms in the last 7 days? Y/N

Diabetes / Hypoglycemia	Y/N	Pregnancy (Term)	Y/N	Skin Allergy / Eczema / Scars	Y/N	I am taking medication
Hypertension / Blood Pressure	Y/N	Hypersensitivity / Inflammation	Y/N	Dizzy Spells / Fainting	Y/N	List medication(s)
Hepatitis (Type)	Y/N	Heart Condition	Y/N	Epilepsy	Y/N	
Asthma / Respiratory	Y/N	Thrombosis / Varicose Veins	Y/N	Other (Specify)	Y/N	
HIV or Aids	Y/N	Haemophilia	Y/N			

- I accept that there are risks associated with this procedure
- I agree to follow aftercare instructions presented by Art + Body Ltd
- I do not hold Art + Body Ltd responsible for negligence on my part
- I attest that I am not intoxicated or under the influence of drugs
- **I have checked and am completely happy with the design I will receive and will follow aftercare instructions**
- **I understand that no refund will be issued but that I am entitled to a free touch up by my artist within 3 months**
- I am over 18 years of age or I have parental consent
- I agree that I have been made aware of all dangers
- I agree that all information I have provided are true and correct
- I give consent to the services and procedures being provided to me

Thank you from Art + Body Creative Studio

Sign _____ Date / / 20