EYELASH EXTENSIONS AGREEMENT AND CONSENT FORM

Full name:
Telephone:
Email:
Referred by:
Initial:
I understand that the procedure requires either synthetic, Silk, or Mink eyelashes to be glued to my own natural eyelashes.
I understand that it is my responsibility to keep my eyes closed and be still during the entire procedure until the technician addresses me to open my eyes.
I understand that some risks of this procedure may be but not limited to eye redness and irritation due to the fumes from the adhesive may cause my eyes to tear up if I open my eyes.
I agree to disclose any allergies that I may have to latex, surgical tape, cyanoacrylate (family of strong fast-acting adhesives with industrial, medical, and household uses), Petroleum jelly, animal hair exc
I understand that I am required to follow the eyelash extension care sheet (attached hereto) in order to maintain the life of my new eyelash extensions
eyelash extensions I agree that by reading and signing this consent form I release Sylvia Gallegos with Guy's Grooming from any claims or damages of any nature.
I agree and I understand and fully read this entire consent form.
I am of sound mind and fully capable of executing this waiver for myself.
I give Sylvia Gallegos with Guy's Grooming to take before and after pictures of my new eyelash extensions to future potential clients YESNO
I confirm and agree that I wish to engage the services of Sylvia Gallegos with Guy's Grooming to apply eyelash extensions.
Print your name: Date:
Signature: