

**Customer Release Form**

**I specifically acknowledge that I have been advised of the matter set forth below, and agree as follows:**

**Initial on the line at the end of each statement**

- I am not pregnant or nursing.
- I do not have epilepsy, diabetes, or hemophilia.
- I do not suffer from any heart conditions or take any medications that thin the blood.
- If I suffer from hepatitis or other communicable diseases, I have informed the piercer of this fact.
- I do not suffer from medical or skin conditions such as, but not limited to, keloid or hypertrophic scarring or psoriasis.
- I do not have any open wounds or lesions at the site of the piercing.
- I have advised then piercer of any allergic reactions to metals, latex gloves, soaps or medications.
- I acknowledge it is not reasonably possible for the piercer to determine whether I might have an allergic reaction to the piercing or the process involved in the piercing.
- I acknowledge that an allergic reaction is possible.
- I have truthfully represented myself, that I am over the age of eighteen (18) years.
- I am not under the influence of alcohol or drugs.
- To my knowledge, I do not have any physical, mental, or medical impairment or disability that might affect my well-being as a direct or indirect result of my decision to have a piercing performed at this time.
- I acknowledge that obtaining this piercing is my choice alone.
- I acknowledge that obtaining this piercing will result in permanent change to my appearance.
- I acknowledge that no representation has been made to me as to the ability to later restore the skin involved in the piercing, to its pre-piercing condition.
- I acknowledge infection is always possible as a result of obtaining a piercing.
- I agree to follow all of the instructions concerning the care of my piercing while it's healing.
- I understand that I will be pierced using appropriate instruments and sterilization techniques.
- I have been given an aftercare sheet.

**I agree to release and forever discharge and hold harmless the piercer and all persons associated, from any and all claims, damages or legal actions arising from or connected in any way with my piercing.**

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**Signature**

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**Date**

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**Legal guardian (if under 18)**

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**Type of ID Used/ ID #**

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**Witness**