ANNE BONNY'S LASH & SKIN BOUTIQUE WAXING CONSENT FORM

Name:	Date:
I.	, give consent to the service provider at
	cheduled waxing service(s):
	b, Tretinoin, Retin-A, Retinol OTC, take home
	eels, other peels, exfoliated or tanned in the last 72 hours.
	cutane for at least twelve (12) months.
	ffects include redness, swelling and pimples, but these are
temporary and generally fade	
	oikini waxing, I will notify my service provider if I am on my
menstrual cycle.	
	en skin lesions or active herpes outbreak (cold sore or
genital).	·
I understand that with	n treatment certain risks are involved and that any
complications or side effects fr	om known or unknown causes could occur. I freely assume
these risks.	
I agree to adhere to	all safety post care : no peels, tanning or wet room services;
no swimming/spas/hot tubs for recommended by my service p	72 hours after waxing; and all home skin care protocols as provider.
• • •	y service provider of any complications or concerns I may
have as soon as they occur.	
My signature acknowledges th	at I have read and agree to receive the treatments or series
of treatments listed above and	that I will adhere to all of the aforementioned statements that
I have initialed.	
Client Signature	
Date	
Service Provider Signature _	
Date	

We have the right to refuse services for all waxing if proper hygiene is not followed. For Brazilian and bikini waxes, please use the provided wipe to cleanse area.