



Microblading Consent Form

Client's Name: _____

Address : _____

Phone: _____

Email: _____

Birth Date: _____ Sex: Male / Female

How did you hear about Gameday Glow? Yelp Google Facebook Instagram
Website Referral

Name of Client: _____

GAMEDAY GLOW, LLC is obligated to perform procedures in strict compliance with all hygiene and health protection measures. This information is confidential and it shall also be handled in that way.

GAMEDAY GLOW, LLC assumes no liability in case of giving false information.

HEALTH QUESTIONNAIRE

In order to perform the permanent makeup in a safe manner, please answer the following health questions truthfully (yes or no)

I understand that if I have any medical conditions that might prevent me from getting the procedure, without a doctors note giving permission, I cannot get the service done
_____ (initials)

Do you suffer from the following diseases or are you taking any of these medications?

Hemophilia YES NO

Diabetes mellitus (diabetes) YES NO

Hepatitis A, B, C, D, E, F YES NO

HIV + YES NO

Skin diseases YES NO

Eczema YES NO



Allergies (for what if yes):	YES	NO
<hr/>		
Autoimmune diseases	YES	NO
Are you prone to herpes?	YES	NO
Infectious diseases / high fever	YES	NO
Epilepsy	YES	NO
Cardiovascular problems	YES	NO
Are you taking medication for blood thinning? (which if yes)	YES	NO
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Are you pregnant?	YES	NO
Are you nursing?	YES	NO
Are you taking any medications on daily basis? (which if yes)	YES	NO
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Do you have a pacemaker?	YES	NO
Do you have problems with healing of wounds?	YES	NO
Have you consumed drugs or alcohol in the last 24 hours?	YES	NO
Did you undergo any surgery in the last 14 days?	YES	NO
Were you exposed to radiation or had any other medical interventions?	YES	NO



CONTRACTUAL OBLIGATIONS

I agree on taking and using photos for advertising and training purposes. YES NO

We have a strict 48 hour cancellation policy due to the length of the appointment. By scheduling an appointment with Gameday Glow, LLC the client understands and agrees to all cancelation policies: Appointments may be cancelled or rescheduled as long as this is done 48 hours prior to service. If the client cancels/reschedules or if appointment is missed within the 48 hours, the client understands they will be responsible for half the cost of their service. _____ (initial)

The following risks are specifically explained to the client:

During the procedure despite the staff expertise and all the precautionary measures, injury is possible. Despite the application of the most advanced and the top quality pigments, allergic reaction is possible but rare. The client is informed about this and he/she assumes liability. _____ (initial)

During and after the procedure temporary swelling, redness and/or itching may occur. _____ (initial)

Depending on the skin structure, after the first treatment small scabs with a loss of drawn hairs may occur and color intensity may change. _____ (initial)

In the first seven days eyebrows are up to 40% darker and 10-15% thicker. Color *i.e.* color reflection depends on the natural skin pigment. _____ (initial)

The pigment is absorbed differently due to differences in the skin quality, thus there is no warranty for the treatment success. _____ (initial)

The shape is determined according to the face proportions. _____ (initial)

Depending on the skin structure it should be noted that change in the color intensity is possible and that one or more additional treatments will be required. _____ (initial)

The minimum or maximum duration of permanent makeup procedures cannot be determined with certainty, nor can the warranty be given on performed treatment. _____ (initial)

Any follow ups fees may apply for future appointments if touch ups are desired. If most of the color has faded then this will not be considered a touch up and all fees for a new service may apply. Complimentary follow ups are performed 6-8 weeks after initial service, but not be necessary. For oily skin it may be necessary to perform more corrections. _____ (initial)



The complimentary follow up is null and void if the client is a no call/no show for the follow up appointment. There will be a touch up fee for future appointments. _____
(initial)

Permanent make-up always leads to the skin injury. Therefore, it is important to carefully and gently nurture your skin after the treatment to allow healing without complications. Inadequate care in healing phase of the skin can lead to poor results and GAMEDAY GLOW, LLC and the technicians cannot be liable for it. _____ **(initial)**

Permanent Makeup is an **ART** and not a *science*. Client's result will vary and using a makeup pencil or brow powder may still be needed. _____ **(initial)**

In the next 10 days the client is required to pay attention to the following:

Keep your treated area dry and clean for the next 10 days. _____ **(initial)**

Avoid water exposure *except* for when gently cleaning the eyebrows with soap and water with a cotton round in the AM/PM. If the area comes into too much contact with water a thick crust will appear disturbing the healing process and may cause fading. _____ **(initial)**

Do not touch the scab in any other case except while cleaning. Let scabs fall off on their own. _____ **(initial)**

If skin is oily or sweaty make sure you clean the skin when necessary. _____
(initial)

Please do not use any other creams except the ones provided or recommended to you in order to prevent possible infections or allergic reactions. _____ **(initial)**

After the scabs have fallen off the area will appear very light. Once the new skin has grown in + the healing is completely done the area will appear. (20-40% lighter)
_____ **(initial)**

In the first two weeks after the treatment *avoid* swimming pools, sun bathing, tanning beds (no tanning for 30 days), sauna, beauty treatments and intense training accompanied by sweating (sport activities), contact with dirt and dust. _____ **(initial)**

GAMEDAY GLOW technicians are not liable in case of improper post-treatment care.
_____ **(initial)**

Absolutely **NO** refunds after any services will be given. _____ **(initial)**



I ACKNOWLEDGE THAT NO GUARANTEES HAVE BEEN MADE TO ME CONCERNING THE RESULTS OF THIS PROCEDURE. _____ (initial)

I ACKNOWLEDGE THAT IF I SHOW UP FOR MY APPOINTMENT AND CANNOT RECEIVE THE PROCEDURE DUE TO MEDICAL REASONS/CONTRAINDICATIONS OR BECAUSE ARTIST'S RECOMMENDATION I WILL BE CHARGED THE CANCELLATION FEE (if you are unsure if you are a good candidate for permanent makeup, Gameday Glow offers complimentary Consults) _____ (initial)

I confirm that I have read and understood the above mentioned information.
____ (initial)

I received a clear and understandable response to all my questions. _____ (initial)

The treatment procedure and post-treatment care was explained to me in detail (explain this in detail during consultation) and I agree with it. _____ (initial)

After Care instructions were reviewed me (will be going over during appointment).
____(initial)

Follow up visits should be done 8 weeks after your initial treatment. Any additional touch ups within 3-12 months are an **additional** charge. WE DO NOT DO FREE TOUCH UP's after the complimentary FOLLOW UP visit, but will be priced accordingly to your individual needs. _____ (Initial)

Touch-Up/Set up Fees (Subject to change)

INCLUDED- 1st Touch Up must take place 6-8 weeks after initial procedure, if you miss your appointment and need a touch up, you may be charged for a follow up/touch up appointment _____ (initial)

\$500 – Microbladed Brows (Strokes Only)

\$575 – Combo Brows (Strokes & Shading)

\$150+ – Color Boost (Touch Ups)

I understand the price list described above _____ (initial)



BEFORE THE TREATMENT:

You have to be off Accutane or any prescribed acne medications for **1 year**. NO Exceptions!

- Do **not** take Aspirin, Fish Oil, Niacin, Vitamin E and/or Ibuprofen or blood thinners, unless medically necessary, **72 hours prior to your procedure**. Tylenol is fine.
- Do not drink coffee, alcohol or energizing drinks the day before + the day of the procedure. This will minimize any oozing/bleeding or swelling after the procedure.
- Do not pick/tweeze/wax/tint brows or perform electrolysis **one week** before the procedure (Wait 14 days after procedure to wax brows + 30 days to tint brows)
- Do not tan or sun bathe **14 days before and after the procedure**.
- No botox **3 weeks prior** to procedure and no type of facials **2 weeks prior** to procedure.
- Do not have any chemical peels, microdermabrasions, mesotherapy, or any other intense treatments which will cause faster skin cell rejuvenating and cause skin irritation **3-4 weeks before procedure**.

AFTER THE TREATMENT:

Absorb: (Immediately after the procedure) gently pat the treated area with a clean tissue to absorb any excess lymph fluid. Do this every 5 minutes until the oozing has stopped. This will prevent hardening of lymphatic fluids.

Wash: (Days 1-7) Gently wash the brows with anti bacterial soap (non scented) and water AM/PM using your fingertips. **Avoid any exfoliating soaps**. This will remove any bacterial, build up of product/oils and dead skin. Gently pat the brows with a clean tissue to dry them. (Do not use a wash cloth)

Moisturize: (Days 1-7) Apply a very thin layer of aftercare ointment to the brows with a Qtip 3x/day. Do not over apply ointment to the brows - this can suffocate and slow down the healing process.



Tips for Aftercare:

- Use a fresh pillowcase while you sleep.
- Let any scabbing or dry skin naturally exfoliate away. Picking can cause scarring or loss of color.
- No facials, botox, chemical treatments or microdermabrasion for 4 weeks.
- Avoid hot, sweaty exercise for one week.
- Avoid direct sun exposure or tanning for 4 weeks after the procedure. Wear a hat when outdoors.
- Avoid long, hot showers for the first 10 days.
- Avoid sleeping on your face for the first 10 days.
- Avoid face-down swimming, lakes, and hot tubs for the first 10 days,
- Avoid topical makeup and sunscreen on the area.
- **DO NOT** rub, pick, or scratch the treated area.

I have read and understood the risks to this procedure. I have read and understood the aftercare protocols after my treatment and promise to follow the aftercare instructions. If I do not follow the aftercare I may ruin the results and the technician and GAMEDAY GLOW has the right to release me from any future services.

Date: _____

Client Name Printed: _____

Client Signature: _____