

Eyelash Extension Liability Waiver

CANCELLATION POLICY

Your appointment time is reserved just for you. A late cancellation or missed visit leaves a hole in the eyelash extension artist's day that could have been filled by another client. As such, we require 24 hours notice for any cancellations or changes to your appointment. Clients that provide less than 24 hours notice or miss their appointment will be charged a cancellation fee.

☐ I Agree to the Cancellation Policy.

WAIVER OF LIABILITY

I understand there are risks associated with having artificial eyelashes applied to and/or removed from my existing eyelashes, and that not withstanding the utmost of care in the application or removal of these products, there still exist risks associated with the procedure and product itself, which include, without limitation, eye irritation, eye pain, discomfort, and, in rare cases, blindness even when applied in the usual manner.

If I experience any irritation, redness, puffiness, itchiness, an allergic reaction or any other side effect of this procedure, I will contact a medical doctor immediately.

As part of this procedure, I understand that a certain amount of eyelash adhesive material will be used to attach the artificial eyelashes to my existing eyelashes. Even though the eyelash extension artist may apply or remove my eyelash extensions in the usual manner, I understand adhesive material may become dislodged during or after the procedure, which may irritate my eyes or require further follow-up care, at my own expense to prevent damage to my eyes. I also understand there is more than one technique for applying eyelash extensions to my eyelashes, and I will not attribute any liability to the eyelash extension artist as a result of this procedure or the use and care of these lashes.

As part of the removal procedure, I understand that a certain amount of chemical adhesive remover is applied to existing adhesives and a reaction occurs to dissolve the adhesive that results in the thinning of the remover. Even though the eyelash extension artist may apply or remove my eyelash extensions in the usual manner, I understand the liquid remover may seep into my eyes, which may irritate my eyes or require further follow-up care, at my own expense to prevent damage to my eyes.

I also agree to defend, indemnify and hold harmless the eyelash extension artist from any and all claims, actions, expenses, damages and liabilities, including reasonable attorneys' fees which might be asserted against her as a result of my having this procedure performed, or my purchase of these eyelash extension products from her.

☐ I Agree to this Waiver of Liability.

PERMISSIONS TO USE PHOTOGRAPHS

I hereby grant the eyelash extension artist the full right to take, publish and reproduce photographs of me, my face, my eyes and/or eyelashes, both before and after this procedure, for any advertising, education, or other purposes whatsoever, including the right to retouch these photographs as deemed necessary by the eyelash extension artist. I further expressly assign any copyright in these photographs to the eyelash extension artist. I also grant my consent for the eyelash extension artist to use my image and likeness as contained in these photographs for any advertising or other purposes

☐ I Agree.

CARE AND MAINTENANCE

I agree to follow the care and maintenance instructions provided by the eyelash extension artist for the use and care of my eyelash extensions, and that if any follow up care is required due to my own mistake or negligence, or failure to follow these instructions, this will be at my own expense and risk. I understand that if I do any of the following, it may result in damage to my eyelash extensions or may cause my lashes to fall off prematurely. Knowing this I agree to follow these tips for best results:

*I will avoid touching the lashes, or spending any prolonged amount of time with the lashes wet for the first 24 hours to protect my lashes.

*I will avoid oil based eye products, as these will loosen the bond of my eyelash extensions.

*If I experience any itching or irritation, I agree to contact a medical doctor immediately and the eyelash extension artist to have the eyelash extensions removed.

*I agree to avoid using mascara and to not use an eyelash curler, perm, or tint my eyelash extensions.

*I agree to not pick, pull or rub my eyelash extensions.

*I understand that I should not attempt to remove my lash extensions on my own or with any product, but that the procedure requires that my eyelash extensions be professionally removed. I understand that if I pick, pull on, or rub my eyelash extensions it may result in the premature temporary and permanent loss of my artificial and natural eyelashes.

I Agree to the Care and Maintenance Terms.

No Known Medical Conditions / Informed Consent

I have read and completed the Eyelash Extension Intake Form in its entirety and in truth. I acknowledge that I have been advised of the potential harmful or negative side effects (such as the premature shedding of my eyelash) that the lash extension procedure or removal may cause to those who have specific medical or skin conditions. I understand that the adhesives and adhesive remover are a skin, eye and mucus membrane irritant and that in rare cases persons may be allergic or have hypersensitivity to synthetics, cyanoacrylate or formaldehyde, which in small amount may be present in the adhesive. I understand that the procedure requires that I lay still for up to 2 hours or longer with my eyes shut, and that if I wear contacts, I must remove my contact lenses for the duration of the lash extension application or removal. I further state that I have no known medical condition that might be aggravated by the procedure or any medical condition that would prevent me from complying with or heeding to the eyelash extension artist's instructions or these warnings.

☐ I Agree.

SPOT TEST

I understand, that should I have any concerns about any possible reaction to chemicals and products used, I may arrange at my own discretion to book an advance spot test where 2 to 3 individual lashes will be applied 24-48 hours prior to the time in which I'm scheduled for my initial full set. I further agree, that this shall be my own responsibility and at my sole discretion, and have absolutely no bearing on the contents or signing of this agreement or any clauses contained therein.

☐ I Agree.

Full Name: _____

Signature: _____

Date: _____