



PARENTAL CONSENT FORM

Name of Minor _____ DOB _____
Parent/Guardian Name _____ Email _____
Phone _____ Birthday _____
Known Allergies _____

In order for your child to receive a spray tan, we need your consent and involvement in helping your child have a rewarding and safe experience. Please read carefully and sign this parental consent form. If you have any questions please feel free to ask!

- I understand that my child will be receiving a spray tan from a certified spray tan professional who has undergone the necessary training to complete this service and provide suggestions for maintaining the spray tan after the service.
 - I understand that, as part of this service, my child will be sprayed with an atomized mist over their entire body, and that my child **MUST** wear any protective items provided by the spray tan technician.
 - I understand that my child **MUST** wear some form of underwear during the entire spray tan service
 - I acknowledge that I have listed out, in full, my child's known allergies and intolerances, and I understand that the spray tan technician can not be held responsible for any reactions resulting from an omission from this provided list
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I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I HAVE READ, FULLY UNDERSTAND, AND AGREE TO THE TERMS OF THIS AGREEMENT. I SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

Signature _____

Date _____