

MICROPIGMENTATION, MAKEUP AND MORE.....

Contract For Services and Indemnity Form

Cosmetic Tattoo/Skin Needling by Bespoke Cosmetic

Name	
Address	
	• • •
Ph no.s homemobile	
Emaildate of birth	

- I understand the treatment is intensive and accept there may be some initial swelling, bruising and crust formation post the procedure.
- I understand that the pigment will last 1-5 years depending on my skin type and that it will look more intense when first established. Maintenance touch ups will be necessary from 6 months to 3 years or longer to keep the pigment looking fresh. With time the implanted pigment will fade and the length of time and level of fading depends on skin type, age, metabolism, smoking, alcohol, sun exposure, Retin A and Glycolic Acids and any problems with the implantation and absorbency into my skin.
- I understand that if I do not follow up with my check up (second appointment, included in initial charge) within two months of the first appointment, then an extra charge may apply.
- I understand that if someone else does the initial pigment implantation and I choose to have a re-touch, correction or removal by the practitioner, that there will be absolutely no claim against the practitioner arising from such remedial treatment.

Please circle the answer that applies.

Aspirin, Warfarin or other blood thinners? Yes/No

Do you smoke? Yes /No

Recently had laser or cosmetic surgery? Yes/No
Pregnant? Breastfeeding? Yes/No
Use Steroids? Yes/No
Have Lupus? Yes/No
Have Epilepsy? Yes/No
Have Keloid scars? Yes/No
Diabetic? Yes/No
Haemophiliac (bleeder)? Yes/No
Any Heart conditions? Yes/No
HIV Virus? Yes/No
Hepatitis Virus? Yes/No
Glaucoma? Yes/No
Recent surgery on eyelids? Yes/No
Lasik Surgery? Yes/No
Dry Eye? Yes/No
Eye Infections? Yes/No
Cold Sore/Herpes/Shingles? Yes/No
Botox and or fillers? Yes/No - if yes where
Use Lash growth serum? Yes/No
On Roaccutane? Yes/No
Thyroid problems? Yes/no
Allergies to Nickel? Yes/No

Allergies to Lidocaine, Tetracaine, Novacaine, Epinephrine? Yes/No

Contact Lenses? Yes/No
Currently using Retin A or Hydroxy/Glycolic Acid skincare? Yes/No
Currently tanned in the area to be tattooed? Yes/No
Have you had alcohol in the last 24 hours? Yes/No
Are there any other current conditions or illness (physical or mental) that you are aware of and receiving medication for? Yes/No - please list if yes
Your practitioner does not attempt to, or claim, to practice medicine. Some individuals will
have complications related to permanent makeup/cosmetic tattoo application. These
complications are usually mild and last only a few days. However, extreme complications are a possibility.
I accept the fee for the procedure. I also accept that there may be an additional charge for
any subsequent appointments that may be made to obtain desired colour or shape. For some
skin types, cosmetic tattooing may be a multi-step procedure.
• I have read and fully understand the above and have been given a copy of this contract.
SignatureDate
Practitioner signature
Procedure - please tick
O Eyebrows O Eyeliner O Lips O Skin Needling O Areola