

ON2U Body Piercing and Tattoo RELEASE FORM

1. I am at least 18 years old. (A Parental Release Form must be completed if you are not of legal age).
2. I do not have any of the following medical conditions: heart, epilepsy, hepatitis, diabetes, hemophilia , AIDS, HIV or any immune deficient condition. I am not under the influence of drugs or alcohol. I am not pregnant or nursing presently.
3. I do not have any physical, mental or medical impairment or disability which might affect my well-being as a direct result of my decision to have my body pierced or tattooed. (E.g. Allergies to latex, antibiotics, ink, metal, or lanolin).
4. I agree to follow all instructions concerning the aftercare of my piercing or tattoo. I agree that any reaction or rejection will be my responsibility.
5. Being of sound mind and body, I hereby release any and all persons at ON2U Body Piercing and Tattoo from all responsibility. I accept any and all responsibility myself for any consequence that might stem from my decision to have any piercing or tattoo by ON2U Body Piercing and Tattoo.
6. I agree not to sue ON2U Body Piercing and Tattoo or it's staff, past or present, for any damages, claims, demands, rights and causes of action of nature whatsoever for any injuries or property damages or death of myself or to any other person arising from my decision to have any piercing or tattoo work done at ON2U Body Piercing and Tattoo by any person whomsoever.
7. I agree for myself, my heirs, my assignees, and legal representatives to hold ON2U Body Piercing and Tattoo blameless for any damages, actions, causes of actions, claims of actions, suits, costs of litigation, attorney's fees, and all costs and expenses whatsoever which might arise from my decision to have any piercing or tattoo work done by ON2U Body Piercing and Tattoo, employees or corporate directors.
8. I agree to pay for any and all damages to any and all persons and property belonging to ON2U Body Piercing and Tattoo, corporate directors and employees and to any other persons or companies which may become libel contractually or by operation of law, caused by, or resulting from my decision to have any piercing or tattoo word done by ON2U Body Piercing and Tattoo, employees or corporate directors.

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9. I agree that this waiver also pertains to and is designated to protect any and all establishments where ON2U Body Piercing and Tattoo, corporate directors or employees conduct piercing or tattooing.
10. I authorize ON2U Body Piercing and Tattoo to use, display, distribute, sell, alter, and publish any and all photos taken of my piercing(s) / tattoo(s). I agree not to request any monies or gratuities from the use, display, distribution, sale, alteration or publication of any or all photos taken by ON2U Body Piercing and Tattoo.
11. I represent to ON2U Body Piercing and Tattoo, corporate directors and employees that the following information is true and correct

PLEASE PRINT (This form must be completed before work will proceed:

Name: _____ (First), _____ (Last)

Age: _____, Birthdate: _____

Phone #: _____, Driver's License: # _____

Address: _____ (Street)

City/Town: _____

Province: _____, Postal Code: _____

Signature: _____, Today's Date: _____