



Client Agreement Form

Date: _____

Client Name: _____

Artist Name: _____

Tattoo Location on Body: _____

Design Description: _____

Estimated Session Duration: _____

1. Health and Well-Being

- I confirm that I am not under the influence of drugs or alcohol.
- I confirm that I am not pregnant or nursing.
- I confirm that I am not currently taking blood-thinning medications or any medications that might affect the tattooing process or healing.
- I confirm that I do not have any medical conditions, such as hemophilia, epilepsy, autoimmune disorders, or infections, that may interfere with the tattooing process or healing. (If you have any concerns, please consult with your physician before proceeding.)

2. Consent and Understanding

- I confirm that I am voluntarily getting a tattoo and that I am not being coerced or pressured by a friend, partner, or family member.
- I acknowledge that I have discussed the design, placement, and size of my tattoo with my artist and I am fully satisfied with our agreement.
- I understand that tattoos are permanent and that the process of removal is costly and may leave scarring.
- I understand that my tattoo may fade over time due to natural skin aging, exposure to sunlight, and other factors, and I may require touch-ups in the future.
- I confirm that I have had the opportunity to ask questions about the tattooing process, potential risks, and aftercare, and I am fully informed before proceeding.

3. Tattoo Aftercare

- I agree to follow the aftercare instructions provided by my artist to ensure proper healing of my tattoo.

- I understand that improper aftercare may result in infections, scarring, or other complications, and I accept full responsibility for any issues that arise due to not following the recommended aftercare procedures.

4. Liability and Waiver

- I understand that my artist will take all necessary precautions to ensure a sterile and safe tattooing environment, including the use of single-use needles and ink, as well as proper sterilization of equipment.

- I release Hopeinks Tattoo Studio, the artist, and all associated personnel from any liability for any injury, loss, or damage that may occur as a result of the tattooing process or the subsequent healing of my tattoo.

- I confirm that I am of legal age to get a tattoo in the state of California (18 years or older) and that I am providing valid government-issued identification.

5. Photography and Privacy

- I consent to my tattoo being photographed during and after the process. These images may be used for the artist's portfolio, website, and social media, unless I request otherwise.

- I understand that my personal information will be kept confidential and will not be shared with third parties, except as required by law.

6. Acknowledgment and Signature

By signing this form, I acknowledge that I have read and understood the above information. I have answered all questions truthfully and to the best of my knowledge. I fully accept the terms and conditions outlined in this agreement.

Client Signature: _____

Date: _____

Artist Signature: _____

Date: _____

Contact info:

Hope Weiss

Email: hopeinks@hopeinks.com

Phone: (209)552-9743

Address: 1700 McHenry Ave Suite 56

Located inside Sola Salons in Studio 23