## **Browns Tattoo Studio - TATTOO AFTERCARE SHEET**

Signature of Client: Date:	
alcohol or drugs.'	
over the age of consent for this procedure (i.e. 18 years old for tattoos) and that I am not currently under the influence	of
I confirm that the above information provided by my for this consent form is correct to the best of my knowledge, that I	an
that it is my responsibility to read this and follow the instructions on it, until the site has healed.	
explained to me. A written aftercare advice sheet containing more detailed information has been given to me and I ag	јге
potential complications, e.g. infection and swelling, for the procedure undertaken, and aftercare instructions have bee	
'I declare that I give my full consent to the tattooing being carried out by the aforementioned practitioner. I confirm that	
Individuals consent	
Localised swelling around the site	
Allergic reactions to pigment	
Localised infection	
Blood poisoning (Septicaemia)	
• Scarring	
Known (potential) risks associated with tattooing:	
For Client's Information:	
DOB:	
Address:	
Tel. No:	
Full Name:	
Clients Details	
Tattooist: Gary Brown	
01246231765	
Chesterfield, S41 0U	
4 The Green Hasland,	
Browns Tattoo Studio	

Signature of Tattooist:

Date:

Appropriate aftercare advice sheet given? YES/NO (please circle as appropriate)