CLIENT INFORMATION



NAME:	BIRTHDA	AY:
Address:		
	City	STATE ZIP
EMAIL:	PHONE	#:
Emergency Contact Name:	PHONE	#:
How did you hear about us?		
(IF REFERRED BY ANOTH DO WE HAVE PERMISSION TO USE ANY PHOTOS OF VIDEOS TAKEN FOR MARKETING	ER CLIENT, PLEASE PROVIDE THEIR	FIRST AND LAST NAME)
MEDICAL INFORMATION		
MEDICAL INFORMATION Please list any medications including Topical Prescriptions or sup taking:	plements (Aspirin, I	Herbals, Fish Oil, Etc.) you are

Please list any medical condition or disease that apply to you:

POLICIES AND PROCEDURES

IN ORDER TO ASSURE THE BEST CARE TO OUR CLIENTS AND STAFF, PLEASE BE AWARE OF THE POLICIES AND PROCEDURES LISTED BELOW. ARRIVAL: We sometimes request that you arrive earlier than your scheduled appointment. Late arrivals will render the remainder of the scheduled service(s).

SCHEDULING APPOINTMENTS: To hold your appointment, a credit card is required at the time of scheduling. Additionally, payment is required when scheduling online.

CANCELLATION POLICY: You will be emailed, called and/or texted to confirm 1-2 days prior to your appointment. As a courtesy to our clients and staff, it is company policy for all clients to give a 24 hours' notice of cancellation. Failure to do so will result in a 50% charge of your scheduled treatment(s). Clients who miss their appointments without giving any prior notification will be charged in full for the missed treatment(s).

GRATUITY: Gratuities may be paid in cash or charged to your credit card upon request. The amount you leave is at your discretion however, 15-20% is customary.

REFUNDS: Services are final sale. Gift cards and laser packages are non-refundable but may be transferable. All jewelry is final sale. Skin care and body care products are returnable within two weeks of purchase with a receipt.

BY SIGNING BELOW, I AGREE TO THE TERMS OF THESE POLICIES AND PROCEDURES.

SIGNATURE: DATE: DATE: