

CONSENT TO PERFORM TATTOOING or BODY PIERCING ON A MINOR
(Any person under 18 years of age.)

Section 1 - Minor

Name _____ Date of Birth _____
Address _____
City _____ State _____ ZIP _____
Signature _____ Date _____

Section 2 – Parent/Legal Guardian

Name _____ Date of Birth _____
Address _____
City _____ State _____ ZIP _____

I hereby give my consent to have a Tattoo/Body Piercing procedure performed on _____, the minor child named in Section 1 of this form. I certify that I am the lawful parent/legal guardian of said minor child. I have received and read the educational information and aftercare instructions regarding this procedure and consent to the procedure nonetheless.

Signature _____ Date _____
(MUST BE SIGNED IN PRESENCE OF A NOTARY)

Subscribed and sworn before me this _____ day of _____, 20_____.

Notary Public Signature _____
Notary Public Name _____
(Typed or Printed)
State _____ **County of** _____
My commission expires _____

Notary Seal or Stamp

Section 3 – Operator

Operator Name _____ **License #** _____
Establishment Name _____ **License #** _____

Type of Procedure to be performed: _____

Location of the body where procedure is to be performed: _____

I certify that the person representing him/herself to be the parent/legal guardian (named in Section 2 of this form) of the minor child (named in Section 1 of this form) is physically present and has shown me his/her government issued photo identification document (such as a state driver's license or state identification card). I further certify that the photograph on said identification document bears a reasonable resemblance to the person presenting same. A photocopy of said document is attached to this consent form.

In addition, I certify that neither the minor child (named in Section 1 of this form) nor the parent/legal guardian (named in Section 2 of this form) appears to be under the influence of alcohol or drugs.

Signature: _____ **Date:** _____

Attach copy of photo id