

**MODEL CONSENT TO APPLICATION OF  
PERMANENT COLOR OR PIGMENT REMOVAL PROCEDURE**

NAME \_\_\_\_\_ DOB \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE. \_\_\_\_\_ WORK PHONE \_\_\_\_\_

I, \_\_\_\_\_ am over the age of 18, am not under the influence of drugs or alcohol and consent to be a model for the following student: \_\_\_\_\_ for the purpose of learning the following procedure: \_\_\_\_\_

The general nature of cosmetic tattooing as well as the specific procedure to be performed has been explained to me and I understand work is from a student.

I certify I have read and initialed the above paragraphs and have had explained to my full understanding this consent and procedure permit and I will not hold the school or the following student: \_\_\_\_\_ responsible for any unforeseen condition arising out of the indicated permanent cosmetic procedure.

SIGNED:

MODEL: \_\_\_\_\_ DATE \_\_\_\_\_

STUDENT: \_\_\_\_\_ DATE \_\_\_\_\_

TEACHER: \_\_\_\_\_ DATE \_\_\_\_\_