

artisticSalon Chemical Waiver Form

Dear valued Guest,

You have chosen to receive a chemical service with us. We pride ourselves on our high level of skill and our long lasting relationship with our guests. Here are some tips that can make your service results more successful.

- Chemical services can have varying results based on your individual hair
- Provide reference photo and clear description of desired results
- It is extremely important that you make your stylist aware of any and all other processes you have used on your hair
- There is a risk of your jewelry (ie. earrings and necklaces) being damaged or lost during the service. We recommend you remove them prior to your service.
- Please feel comfortable contacting the salon at any time before or after your service if you have any questions or concerns.

Liability Waiver

I have been made aware by _____, a technician of artisticSalon that I am choosing to receive a _____ service and the agreed upon process(es) to achieve my desired results. I have made my stylist aware of all the processes I have used on my hair previously to assist in their assessment of my hair's current status, and in addition, the requested services to achieve my desired results.

I realize and agree to the following:

- 1) any information I withhold regarding my previous processes and health history will increase the chances of damage and the potential for unpredictable chemical reactions.
- 2) Chemical processes may cause some damage to the integrity of my hair.
- 3) There are products recommended to improve the health of my hair as well as maintain the results after the service.
- 4) My technician has been trained in the service technique and that they will do their absolute best to create the best results and therefore as an ongoing basis, I will not hold liable artisticSalon, or my technician if the process has unexpected or undesired results.

Thank you and we look forward to working with you.

Customer Printed Name: _____

Customer Signature: _____

Date: _____

Technician Printed Name: _____

Technician Signature: _____

Date: _____

Technician Comments: