



INK INK TATTOOS & PIERCING

CLIENT RECORD

556 S. Highway 27 #D | Minneola, FL 34715 | 352-394-1882

ALL TATTOOS AND PIERCINGS WILL BE PHOTOGRAPHED - NO EXCEPTIONS

01 CUSTOMER INFORMATION

Last Name	First Name	MI	Age	Date of Birth	Today's Date
Address		City	Phone Number		Email Address
Race	Sex:	☐ Male	☐ Female	☐ Other	

02 EMERGENCY & PHYSICIAN INFORMATION

EMERGENCY CONTACT	PHYSICIAN
Name	Name
Phone Number	Phone Number
Address	Address

03 MEDICAL SCREENING QUESTIONNAIRE

Please mark Yes or No for every question.

- | | | | |
|---|---|--|---|
| 1. History of jaundice or hepatitis? | ☐ Y ☐ N | 6. History of diabetes? | ☐ Y ☐ N |
| 2. History of AIDS or positive HIV tests? | ☐ Y ☐ N | 7. Currently taking medications which thin the blood and prevent clotting? | ☐ Y ☐ N |
| 3. History of skin disease or skin cancer at the site of service? | ☐ Y ☐ N | 8. Currently pregnant or under the influence of drugs or alcohol? | ☐ Y ☐ N |
| 4. History of allergies or anaphylactic reaction to pigments, dyes, or other sensitivities? | ☐ Y ☐ N | 9. Any other medical condition which would influence or impair healing? | ☐ Y ☐ N |
| 5. History of hemophilia (bleeder)? | ☐ Y ☐ N | | |

If yes to any item above, please explain:

04 PROCEDURAL INFORMATION

TATTOO

- The area may need to be shaved and will be cleaned with antibacterial soap.
- A stencil will usually be applied; some designs may be drawn by hand.
- While the stencil dries, the artist prepares inks, sterilized needles, and equipment.
- The tattoo is rendered into the skin one color at a time using needles.
- Larger pieces may require more than one sitting.
- The tattoo is cleaned and a bandage is applied after the procedure.
- Proper aftercare is your responsibility. Read the provided aftercare instructions.
- Soreness, bruising, and scabbing may occur during healing; complications are uncommon with proper care.
- Tattoos are permanent.

☐ I have read and received all information about my procedure.

I understand possible consequences may include swelling, infection symptoms, irritation, pain, scarring/deformity, or allergic reaction.

If any portion of this form is not understood, explain before signing:

PIERCING

- A minor requires written notarized consent of a parent/legal guardian; under 16 also requires parent/legal guardian present.
- The area will be inspected for rash or openings before piercing.
- If clear, the area is cleaned with iodine and alcohol.
- Piercing is performed using aseptic techniques.
- Procedure tools are sterilized by autoclave.
- Used supplies are disposed of under Florida biomedical waste requirements; tools are cleaned and re-sterilized.
- Before the procedure: eat to maintain blood sugar, use sunblock because burned skin cannot be pierced, and remove makeup/hair as needed.

☐ I have read and understand this sheet.

05 IDENTIFICATION & SIGNATURES

Attach copy of driver's license / government-issued photo ID.

Customer Signature	Date
Legal Guardian Signature - if applicable	Date

ARTIST / PIERCER COMPLETION - INTERNAL

Procedure Location	Jewelry / Tattoo Description	Condition of Skin	Complications
Pigment Brand Used	Pigment Color Used	Artist / Piercer Signature	Print Name