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BRANDY PASCHALL
MASSAGE & ESTHETICS

Patch Test Consent Form

Although allergic reactions to eyelash extension adhesive are extremely uncommon, they can occur. It is recommended that a tiny amount of glue be placed to the client's lashes 48 hours before to the application of a full set of extensions.

Please fill out and initial the form below to confirm your understanding that if you experience any signs of redness, itching, swelling, or blistering, you should return to have any remaining adhesive removed and not continue with treatment.

Do you have any allergies? _____

Please Initial each statement:

- _____ I am aware that there are hazards involved with having false eyelashes added to or removed from my natural eyelashes.
- _____ I confirm that all reactions, sensitivities, and hazards have been disclosed to me, and I have been given the opportunity to ask questions.
- _____ I assume full responsibility for any possible dangers, reactions, and sensitivities, and I have informed my provider of any allergies.
- _____ I understand and agree that I will call my provider promptly if I suffer an adverse response. I am aware that I may be required to seek medical care at my own expense.
- _____ I will not hold my provider accountable for any responses, sensitivities, or injuries that may arise from this treatment.
- _____ My provider has made a patch test option available to me. I am aware that refusing a patch test may result in allergic responses and treatment refusal.

By signing below, I hereby acknowledge that I have completely read and fully understand the above agreement.

CLIENT PRINTED NAME

CLIENT SIGNATURE

DATE