

Client Consent Form

1. I agree to come to my appointment with clean, dry lashes; lashes that are free of makeup, mascara, lotions, dyes, and perfumes
2. I agree to use only recommended products on my eyelash extensions
3. I understand that there are many variables, including technician expertise, natural lash growth cycle, use of cosmetics and skin care products, and the overall maintenance given that will influence how long my eyelash extensions remain in place
4. I acknowledge that I should not pull on my lashes after they have been applied
5. I understand that if a certified lash extensionist does my apply eyelash extensions properly there is a risk of eye damage and harm to my vision
6. I understand that there is a potential possibility of allergic reaction, as with all cosmetic products
7. I have been advised that using mascara on a regular basis will shorten the length of time my extensions remain in place. I have also been advised not to use waterproof mascara on my eyelash extensions
8. I understand that touch up appointments may be necessary as soon as two to three weeks after the application and that there is a fee for this procedure
9. I acknowledge that by signing this consent form, it will act as solid proof I have read, and I understand the terms above for today and any future appointments I have using eyelash extensions

I, \_\_\_\_\_, authorize \_\_\_\_\_  
to apply eyelash extensions to my lashes

Client Signature \_\_\_\_\_

Date: \_\_\_\_\_