Semi-Permanent Makeup

Client Satisfaction Form

Please sign below to agree to the following; if you are unable to agree to any of the statements below then please allow me the opportunity to explain, or remedy the situation before you leave.

* I am happy with the shape, colour, thickness and finish of my procedure and it is how we have discussed during the consultation;
* I am aware that there is a risk after one procedure that it may fade to what appears to be nothing while healing – this is completely normal and what the top up procedure is intended for;
* I am aware that should I change my mind on the shape, colour or thickness that *minor* alterations can be made at the top up appointment, however the results of alterations cannot be guaranteed.

I accept that the undersigned the aforementioned

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_