

Parental Chemical Service Consent Form

As the parent or legal guardian of _____ (minor receiving services name), I give permission for her/him to have the following services performed:

- Blonding Service (any bleaching service)
- Coloring Service
- Corrective Color
- Fashion Color
- Smoothing Treatment (Brazilian Blowout/ Keratin Treatment)

Price Quote for services: _____

I confirm that I have given permission for my child to receive the above services at the quoted price. I have been informed of the proper at home care and I agree to supervise any home care procedures that are recommended by the stylist to ensure the longevity of the services. I release Jenny Lancaster and Elle Reve Salon Studio of any and all liability.

Date: _____

Full name of parent or guardian: _____

Signature of parent or guardian: _____

Signature of Stylist: _____