Logo, company name

Description automatically generated

**Known condition Disclaimer**

I, the undersigned confirm the following:

* I am happy to proceed with the treatment despite my known condition ………………………………………………………………………………………………………………………………………………………………………
* I understand that it is my responsibility to proceed and not that of Siren Beauty carrying out the treatment.
* Siren Beauty will not be held accountable for any medical reactions or concerns as a result to the treatment received

Full Name :

Signature:

Date :

Artist to sign: