



2024-02-15

Tattoo Consent Form-Mad Ink by Stripes
Suite Society 750 W. Garden of the Gods Rd.
- Artist: Maddie (Aka Stripes) - 719.428.5728 -

Client Information

Front of Id:



Back of Id:



Name: Micah Awtrey

Preferred pronouns: he/him

Age: 25

Date of birth: 1999-06-06

Phone number: 17195646548

Email address: micah.a.awtrey@gmail.com

Address: 1234 Street St, CityTown, CO 80909

Brief Description of the tattoo: Weapons

Placement of tattoo: Arms

How did you hear about us?: Marriage

Pre-Prodecure Questionnaire

Are you under the influence of drugs or alcohol? Yes

FEMALE ONLY: Are you pregnant or nursing? null

Do you have a communicable disease? Yes

Do you have any skin conditions? Yes

Please tell us about your medical history (e.g. Are you on blood thinners?, Diabetes, Cardiovascular Disease, Epilepsy, Blood-related disease, Hemophilia ,immune compromised, etc.)

Client did not declare anything.

Acknowledgment and Waiver

Please check the box and initial under each statement.

- ☒ I understand that this procedure is a permanent change to my skin and body.

Initial: MA

- ☒ I allow my tattoo to be photographed and be used for Mad Ink by Stripes portfolio. Pictures may be posted on Facebook, instagram, and studio website.

Initial: MA

- ☒ I acknowledge that Mad Ink by Stripes does not offer refunds or free touch ups after 3 months. Hands, fingers, feet, and micro tattoos do not get free touch ups at any time.

Initial: MA

- ☒ I agree that the studio does not have a way of identifying if I am allergic to the elements or ingredients that will be used for my tattoo. If I am allergic to anything I will let my artist know. That includes pigment, dyes, soaps, disinfectant, latex, metal, and food allergies.

Initial: MA

- ☒ I understand that I need to take care of the tattoo by following the written and verbal aftercare provided.

Initial: MA

- ☒ I understand that I might get an infection if I don't follow the instructions given to me in regards to taking care of my tattoo. If I have had issues healing before, I will tell

my artist before the session.

Initial: MA

☒ I agree to compensate Mad Ink by Stripes for the services provided today by paying the agreed-upon price for the session.

Initial: MA

☒ I acknowledge it is not reasonably possible for an employee of Mad Ink by Stripes to determine whether I have an allergic reaction to the pigments or processes used in my tattoo and I agreed to accept the risk that such a reaction is possible. I will search for medical attention if needed.

Initial: MA

☒ I confirm that the information I provided in this document is accurate and true.

Initial: MA

☒ I confirm that I am 18 years or older.

Initial: MA

Signed Date: 2024-02-15

Client Signature

A handwritten signature in black ink, appearing to be a stylized name like 'Cecilia' or 'Cecilia', written in a cursive script.

Mad Ink By Stripes After Care Instructions

If you have any questions or concerns, Call or Text (719)-428-5728

Remove saniderm 12- 15 hours after tattoo procedure. Wash immediately.

****DO NOT LEAVE ON LONGER THAN 24 HOURS****

If paper towels or gauze are used to cover a larger tattoo, remove within 2 or 3 hours.
Wash immediately.

After bandage is removed, wash tattoo with warm water and gentle fragrance free soap.
Blue Dawn or Dial is recommended

Wash tattoo 2-3 times a day and keep clean
Gently PAT dry with a paper towel
Apply a thin layer of ointment after drying the tattoo
Aquaphor or Bag Balm is recommended

If your tattoo is looking dry throughout the day, apply another THIN layer of ointment. DO NOT stay in direct sunlight or use tanning beds until the tattoo is healed. Approx 14 days. After 2 weeks, use at least SPF 25 to protect tattoo from fading.

DO NOT soak in the bathtub, hot tub, sauna, jacuzzi, or swimming pools while your tattoo is healing. Approx. 14 days

YOU MUST SHOWER to keep your tattoo healthy

DO NOT scratch or pick at tattoo. It could cause color loss, scarring or infection. Ink and skin flaking off and scabbing is normal.

Tattoos will cause redness and swelling but if you develop a fever, rash, yellow/green discharge, or constant irritation after 7 days, call your doctor immediately.

Client Signature

Date: 2024-02-15

A handwritten signature in black ink, consisting of a large, stylized 'C' followed by a series of loops and a long horizontal stroke.

Please Type Name, Sign, and Date

By signing these forms I acknowledge that I have read and understand all pages of this consent form. I acknowledge that all information is correct. I understand that tattoos are permanent and will change my appearance forever. I ACKNOWLEDGE THAT WRITTEN AND VERBAL AFTERCARE WERE PROVIDED.

Full Name: Micah Awtrey

Signature

A handwritten signature in black ink, consisting of a stylized 'M' followed by a long horizontal stroke.

Date: 2024-02-15

FOR TATTOO ARTIST ONLY

Artist Signature

Date: 2024-02-15

A handwritten signature in black ink, featuring a large, stylized 'S' followed by a horizontal line.

Name of Artist or Representative: Stripes

Signed Date: 2024-02-15

LOT #- EXPIRATION DATE - STERILIZATION DATE -COMPANY/BRAND

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