



Consent and Waiver Form

PLEASE READ AND SIGN

1. Waiver and Liability: I understand the risk associated with having artificial lashes applied to and/or removed from my existing eyelashes, and that notwithstanding the utmost of care in the application or removal of these products, there still exist risks associated with the procedure and product itself, which include, without limitation, eye irritation, eye pain, discomfort, and in rare cases, blindness when improperly handled. As part of this procedure, I understand that a certain amount of eyelash glue will be used to attach the artificial eye lash extensions to my existing lashes. Even though the technician may apply or remove my Lashes properly, I understand glue may become dislodged during or after the procedure, which may irritate my eyes or require further follow-up care, at my own expense to prevent damage to my eyes. I also understand there is more than one technique for applying Johnny's Lashes since we provide a variety of styles, and will not attribute any liability to Technicians or the Company from any of all claims, actions, expenses, damages and liabilities, including reasonable attorneys fees as result of any procedures performed, or purchase of any product. By signing this document you are waiving the right to any claims against the technician and the Company. As used in this agreement the terms for "technicians" or employees and "Johnny's Lashes" include all respective owners of which company you are getting services from.

2. Permission to Use Pictures. I hereby Johnny's Lashes Company associated the full right to take, publish and reproduce photographs of me, my face, my eyes and/or eyelashes, both before and after procedure, for any advertising, If you do not wish to have pictures taken please advise the technician.

3. Care and Maintenance: I agree to follow the care and maintenance instructions provided by Johnny's Lashes and/or technician for the use and care of my Lashes, and that if any follow up care is required due to my own mistake or negligence, or failure to follow the instructions this will be at my own risk. I understand that if I do any of that following, it may result in damage to my Lashes or may cause my lashes to fall off prematurely. Knowing this I agree to follow these tips for best results. I will avoid oil based eye products as these will loosen the bond of my Lashes. I will avoid getting my lashes wet within the first 24 hours after my application. Please note we offer Sealer to protect lashes from separating. For the first two try to avoid swimming, saunas or steam rooms. If I experience any itching or irritation, I agree to contact the company to see what location is closer to try to accommodate myself to be seen as soon as possible to have the lash extensions removed. I agree to avoid using waterproof mascara, or any other mascara and not to use an eyelash curler, perm, or tint my lashes. I agree to not pick, pull or rub my Lashes. I understand that I should not attempt to remove my lash extensions on my own or with any product, but the procedure requires that my eyelash extensions be professionally removed.

I understand that the natural lash cycle is six to ninety days. When one lash falls out, there is another lash growing in I, therefore, understand that I will need regular refills (every 2-4 weeks) to keep my lashes looking beautiful. I understand that variables, including the natural lash cycle and customer care, will influence the longevity of eyelash extensions.

4. Services. We offer clusters and individuals (synthetic, human, silk and mink) and we offer types of glues. It is your responsibility to choose that one you think is best for you. We offer more than 30 styles that are combination clusters and individuals and for our custom Individuals Lashes we use volume lashes one, two and three. Weave in Technique is a Patent from Johnny's Lashes and its a service that you can only offer

5. Warranty. We offer 4 days from the date of your new set or 3 days from the date of your fill or fix. You can and get a fix/fill at no extra charge.

In the event of you getting eye irritation or in the event of you having an allergic reaction to the lashes we can do the Eyelash Remover at no cost to you. Otherwise you have to agree to pay for removal fee.

We have a NO REFUND policy if the lashes you pick are not the ones you expect after all we will gladly give a discount to get a new set.

5. No Known Medical Conditions: I acknowledge that I have been advised of the potential harmful or negative side effects (such as premature shedding of my eyelash) that the lash extension procedure or removal may cause to those who have specific medical or skin conditions. I understand that the adhesives and adhesive remover are a skin, eye and mucus membrane irritate and that in rare cases persons may be allergic or have hypersensitivity to the lashes or materials (synthetics, silk, human, mink). Also keep in mind that the glue may cause irritation depending if you are taking certain medication. I understand the procedure requires that I lay still for up to 45 minutes or longer depending on the design that I choose with my eyes shut, and that if I wear contacts, I must remove my contact lenses for the duration of the lashes extension application or removal. I further state that I have no known medical condition that might be aggravated by the procedure or any medical condition that would prevent me from complying with these instructions or these warnings.

If any action is brought to enforce the terms of this agreement, the prevailing party (client with name below) shall be entitled to its costs and attorney's fees. This agreement will remain in effect for this procedure and all future procedures performed by any technician working for the salon named above

By signing this document I agree to all the terms and conditions of services and waive all the rights to sue the technician or salon named above.

Signature

Print Name

Date