

P L E A S E N O T E :

- It is important to use these consent forms and consent letters in conjunction with applicable federal and state laws, as they apply to the standard of care required to provide such medical and cosmetic treatments.
- These forms are meant for guidance only. We recommend that you use the forms in conjunction with individual legal counsel based on your individual situation, and not as a substitute for legal advice.
- With that being said, we do want to clarify that the following is set of suggestions which should be used in conjunction with applicable laws.



CONSENT FORM

Thank you for choosing our jewelry shop to create your permanent jewelry. In order to provide you with the best possible service and ensure your safety, we require that you complete this Intake and Consent Form.

Please read this form carefully and sign it to indicate that you understand and agree to the terms and conditions outlined below.

I have voluntarily elected to undergo this appointment after the nature and purpose has been explained to me, along with the risks and hazards involved by Seodra Jewelry.

By signing this form, I acknowledge that there are inherent risks involved with welding permanent jewelry. These risks include but are not limited to burns, discomfort, allergic reactions, and potential scarring, and I accept any such risks.

I agree to provide accurate and complete information about your health history, including any medical conditions, allergies, or medications that may affect your ability to undergo the welding process

By signing this form, I release Seodra Jewelry and its employees from any liability for any harm, discomfort, or injury that may occur during the welding process. I also acknowledge that any injury or harm that results from the welding process is solely my responsibility.

I acknowledge that I have received and understand the aftercare instructions for the permanent jewelry, and agree to follow them as directed.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND ALL THE INFORMATION IN THIS AGREEMENT AND I COMPLETELY UNDERSTAND IT BY SIGNING BELOW

_____ <i>Client Signature</i>	_____ <i>Date</i>
_____ <i>Jeweler Signature</i>	_____ <i>Date</i>

Seodra
JEWELRY
SEODRA JEWELRY

CONSULTATION FORM

PERSONAL INFORMATION

Name: _____ DOB ____/____/____ Date of Appointment: ____/____/____

Address: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

Email: _____ Gender: ☐ M ☐ F ☐ O

Medical Allergies: _____

Medications: _____

Emergency Contact Name _____ Phone number _____

APPOINTMENT INFORMATION

Type of Jewelry

☐ Bracelet

☐ Necklace

☐ Anklet

☐ Ring

☐ Other

Type of Material

☐ Gold-
Filled

☐ Sterling
Silver

☐ Other

Method

Other Information



CONSULTATION FORM

HEALTH INFORMATION

- Do you have any chronic medical conditions? ☐ Yes ☐ No
If so please list _____
- Do you have any Allergies? ☐ Yes ☐ No
If so please list _____
- Are there any pre-existing skin conditions or scarring in the area where the welding will take place? ☐ Yes ☐ No
- Do you have Psoriasis, Eczema, or other inflammatory skin disorders? ☐ Yes ☐ No
- Do you have any Sensitivity or allergy to metals? ☐ Yes ☐ No
- Do you have Blood disorders (hemophilia) ? ☐ Yes ☐ No
- Do you have any Photosensitivity ? ☐ Yes ☐ No
- Are you HIV positive? ☐ Yes ☐ No
- Do you have Epilepsy or Parkinson's disease? ☐ Yes ☐ No
- Do you have type 1 or 2 Diabetes? ☐ Yes ☐ No
- Do you have or have you had Cancer in the last 12 months? ☐ Yes ☐ No
- If yes, are you currently under Chemotherapy or Radiation? ☐ Yes ☐ No
- Do you have any Porphyria ? ☐ Yes ☐ No
- Do you have Asthma or Chronic Obstructive Pulmonary Disease? ☐ Yes ☐ No
- Do you have Lupus or Rheumatoid Arthritis? ☐ Yes ☐ No
- Are you currently (or possibly may be) Pregnant? ☐ Yes ☐ No



PHOTO & VIDEO RELEASE WAIVER

If you give us permission to take photos and videos of you during and after the appointment, please check the appropriate boxes:

- ☐ My photographs and videos may be used for display and/or educational purposes
- ☐ I give permission for my photographs to be used within printed publications
- ☐ I give permission for my photographs and videos to be used on the social media pages and/ or website
- ☐ I do not want my photograph and video taken

I understand and agree that these materials shall become the property of Seodra Jewelry and will not be returned.

This authorization extends to all languages, media, formats and markets known or hereafter devised. This authorization shall continue indefinitely, unless I otherwise revoke said authorization in writing.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND ALL THE INFORMATION IN THIS AGREEMENT AND I COMPLETELY UNDERSTAND IT BY SIGNING BELOW

_____ <i>Client Signature</i>	_____ <i>Date</i>
_____ <i>Jeweler Signature</i>	_____ <i>Date</i>



CANCELLATION POLICY

Payment: Payment in full must be received on or before the first day of the appointment. We offer the following payment options:

Cash or Check: We accept Cash, Checks, and Cashier's checks for payment for treatments. All returned checks will be assessed a return check charge of \$30.00 each time a check is returned, regardless of the reason.

Credit Cards: We accept Visa, MasterCard, American Express and Discover.

Punctuality: Please arrive 15 minutes early so you can prepare for your appointment and enjoy the experience.

Arriving late: By arriving late, you will disrupt your appointment, reducing the time available for the appointment. Your appointment will end at your scheduled time and there will be no disruption with the next appointment.

No show: We recommend that you get in touch with us and let us know if you will be late. No shows lead to the disengagement or voiding of any agreements you may have with our office.

Should you fail to arrive for your scheduled appointment without notifying us in advance, your deposit or future appointments may be forfeited.

Cancellation: The scheduling policy of our office is very strict due to the time constraints of appointment. Due to this, we ask that you respect our one-week cancellation/rescheduling policy.

Cancellation: We adhere to a strict one-week cancellation/rescheduling policy. In the event you fail to reschedule your appointment one week prior to the initial appointment, cancel your appointment, or do not appear, you may forfeit your future appointments as well as any unused money or deposits.

An appointment cancelled 8 or more days before it is normally scheduled will result in a 5% loss of all fees to cover credit card charges.

There will be a 25% fee loss if you cancel four to seven days prior to your scheduled appointment time.

If you cancel less than 72 hours before your scheduled appointment date, you will be charged 50% of the total fee.