

# SUGARING INTAKE FORM

Client Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_

Phone: home: \_\_\_\_\_ cell: \_\_\_\_\_ work: \_\_\_\_\_

Email Address: \_\_\_\_\_ We use email addresses to do reminders for appts, and keep you updated.

Referred By: \_\_\_\_\_ (Google, Yelp, Friend, Family etc.)

## BEFORE SUGARING (circle Yes OR No)

Have you ever had a professional sugaring or waxing? Yes / No

Have you ever had an adverse reaction to sugaring or waxing? Yes / No

Have you had a peel, microdermabrasion, or sun tanned in the past 48 hours? Yes / No

Do you have any allergies? Yes / No

List all allergies/allergens: (don't forget, product ingredients, foods, plants/herbs, latex, etc)

Are you taking any medications? Yes / No (circle ALL high-risk medications that apply)

Accutane	Adapalene	Alustra	Avita	Differin	Tretinoin
Isotretinoin	Renova	Retin A	Tazarac	Tazarotene	Benzoyl Peroxide
Retinol	Antibiotics	Heart Meds	Acne Meds		

List ALL other medications: (any medication can be a risk during hair removal)

Are any of these conditions present? (circle ALL that apply)

Varicose Veins	Recent Surgery	Sunburn	Allergies	Infection	Heart Condition
Phlebitis	Diabetes	Capillaries	Rash	Stress	Moles
Scar Tissue	Herpes	Pregnancy	Hypertension	Fungus	Ingrown Hair
Chemotherapy	AIDS/HIV	Hepatitis	Warts/HPV	Acne	Menstrual Cycles

All other conditions: \_\_\_\_\_

Did you consume any of the blood thinners below this week? Yes / No

In the last 24 hours? Yes / No

(circle ALL that apply)

Tylenol	Advil	Pain Killers	Lots of Fruit	Vitamin C Supplement
Multi-Vitamin	Alcohol	Sugar	Caffeine	Nicotine
Any Medication	Herbs	Juices	Herbs	

Any above items being present can cause you to experience more discomfort, an increased chance of side effects like skin injury, bruising, scabbing or other complications. You must inform your practitioner immediately if any of the items above change at any time in-between services. Your intake information is important to keep up to date for your safety during hair removal or other services. Thank You.

Client Print, Sign & Date: \_\_\_\_\_

Practitioner Reviewed Print, Sign & Date: \_\_\_\_\_

## TREATMENT RELEASE & CONSENT

I acknowledge that the practice of skin care and massage including micro ablation, microdermabrasion, facial toning, body treatments, chemical services, brown spot removal, waxing, sugaring, eyelash extensions, ion detox footbaths, spray tanning, and various other beauty or health procedures is not an exact science, and no specific guaranties can or have been made concerning the expected result. I understand that some clients experience more change and improvement than others. In virtually all cases, multiple treatments are required to realize a difference.

I also understand and agree to assume the following risks and hazards which may occur in connection with any treatment I receive including but not limited to unsatisfactory results, poor healing, discomfort, redness, blistering, nerve damage, scarring, infection, change in skin pigmentation, allergic reaction, muscle damage, and increased hair growth. I understand that even though precautions may be taken in my treatment, not all risks can be known in advance.

Given the above, I understand that response to treatment varies on an individual basis and that specific results are not guaranteed. Therefore, in consideration for any treatment received, I agree to indemnify, hold harmless, and release from any and all liability the insured as well as any officers, directors, assigns, insurers, affiliates or employees of the insured for any condition, result, or negligence known or unknown that may arise as a consequence of any treatment that I receive.

### VIDEO AUDIO SURVEILLANCE

I understand that to promote the safety of employees and company visitors, as well as the security of its facilities, Jessa Skin LLC may conduct video or audio surveillance of any portion of its premises at any time, the only exception being private areas, treatment rooms, restrooms, and any area you will be undressed. Video cameras will be positioned in appropriate places within and around Jessa Skin LLC buildings or property. I also understand that audio recording surveillance may be used throughout facility. I hereby give my consent to such video and audio surveillance at any time the company may choose. I hereby release Jessa Skin LLC from all liability, including liability for negligence, associated with the enforcement of these policies and/or any searches or surveillance undertaken pursuant to these policies.

### PHOTO & VIDEO CONSENT

I grant permission to Jessa Skin LLC, its employees and agents, to take and use visual/audio images of me. Visual/audio images are any type of recording, including but not limited to photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips or accompanying written descriptions. Jessa Skin LLC will not materially alter the original images. I agree that Jessa Skin LLC owns the images and all rights related to them. The images may be used in any manner or media without notifying me, such as social media, websites, publications, promotions, broadcasts, advertisements, posters, as well as for non-spa uses. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them, or to be compensated for them. I release Jessa Skin LLC and its employees and agents, including any firm authorized to publish, broadcast and/or distribute a finished product containing the images, from any claims, damages, or liability which I may ever have in connection with the taking or use of the images or printed material used with the images. I am at least 18 years of age and competent to sign this release. I have read this release before signing, I understand its contents, meaning and impact, and I freely accept the terms. I UNDERSTAND INITIAL HERE: \_\_\_\_\_ I DECLINE INITIAL HERE: \_\_\_\_\_

### OTHER POLICIES & SPA RULES

- **PRODUCT RETURNS:** We do not accept product returns on any open products, products must be returned within 14 days unopened.
- **APPOINTMENT CANCELLATION:** We have a 48-hour cancellation policy, all guests after missing one appointment without notice are required to keep a valid credit card on file. If you do not cancel or change your appointments within 48-hours you will be charged in full for your missed services.
- **FRAGRANCES:** One of our practitioners has asthma, strong/any man-made fragrances especially perfume, hair products, lotion, laundry detergent trigger asthma attacks. Please do not wear them to your appointments.
- **CHILDREN/PETS:**  
Children under 12 years old will not be allowed in the spa waiting area. No child can be left unattended while you are receiving services. Children must always be attended to, children are not allowed in the treatment rooms.  
Pets are not allowed under any circumstances, only licensed trained service dogs for the blind or medical reasons are permitted. Emotional support animals are not allowed on the premises.  
Our insurance does not allow us to have kids or animals in the spa especially unattended. Our walls are very thin, extra noise will disturb the other practitioners.
- **SERVICE DISSATISFACTION:** If you have received a service, you are not satisfied with, we do not provide refunds. You will be required to come back in within 24-hours so we can examine the skin. We will make our best effort to find a resolution for you. For all hair removal, if you come in with lotion or oil on, you do not exfoliate with an approved scrub, you understand that the sugar will not perform the same way, which may not produce the desired result.
- **LATE POLICY:** If you are more than 5-10 minutes late depending on how long your service time is booked for, we may have to reschedule your appointment or shorten your service/s. You will be responsible to pay in full for your services. Practitioners may run 5-10 minutes behind; we will make our best effort to notify you via text, if this happens, please allow up to 15 minutes after your start time to begin the service before leaving, you will be charged in full for your services if you leave before that.

Client Print, Sign & Date: \_\_\_\_\_