

TATTOO WAIVER FORM

Business Name: _____

Date: _____

Liability waiver form for tattoo studios focusing on risk acknowledgment and release of claims. Complements the standard consent form.

** Required fields*

Full Name *

John Doe

Date of Birth *

Phone Number *

ID Type *

Options: Driver's License / State ID / Passport / Military ID

ID Number *

Tattoo artist name *

Tattoo location on body *

- I confirm I am at least 18 years old *
- I confirm I am not intoxicated *
- I understand tattooing involves health risks including infection *
- I accept full responsibility for my decision to get this tattoo *
- I waive the right to sue for outcomes resulting from this procedure *

Client Signature *

Sign here

Date: _____

CONSENT / WAIVER

ASSUMPTION OF RISK AND WAIVER OF LIABILITY: I voluntarily assume all risks associated with the tattooing procedure. I understand that tattooing involves penetrating the skin with needles and that risks include but are not limited to: infection, allergic reaction, scarring, granulomas, MRI complications, and dissatisfaction with the final result. I waive any and all claims against the tattoo artist, studio, and their employees for damages arising from this procedure, except in cases of gross negligence or willful misconduct. This waiver is binding upon my heirs, executors, and assigns.

Client Signature: _____

Date: _____

Print Name: _____