

# Sugar Studio

## Parental Consent Form

I, \_\_\_\_\_ give my permission as Parent/Guardian  
of \_\_\_\_\_ to receive the following spa services.

### Initial All That Apply:

<input type="checkbox"/> Waxing/Tinting	<input type="checkbox"/> Massage	<input type="checkbox"/> Microdermabrasion
<input type="checkbox"/> Sugaring	<input type="checkbox"/> Body Polish/Wrap	<input type="checkbox"/> Eyelash Extensions
<input type="checkbox"/> Facial	<input type="checkbox"/> Glycolic Peel	<input type="checkbox"/> Microblading
<input type="checkbox"/> Other _____		

I agree not to hold *Sugar Studio* or any of its employees responsible for any injuries, accidents, communication differences, conflicts or physical illness that may arise from the service.

It is understood that this parental consent is being given in advance of all services. I also agree that *Sugar Studio* is to exercise their best judgment as to the manner and requirements of administering services to the above minor.

My signature below constitutes that: (1) I have read and understood and fully agree to the parental consent. (2) The proposed spa service has been satisfactorily explained to me and I have all the information that I desire. (3) I hereby give my authorization and consent for said minor child to receive service at *Sugar Studio*.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date