

BEAUTY BROW & LASH BAR

Shop 6/260 Chapel Street, (entry via King St) Prahran, VIC 3181

0422 436 334

CLIENT REGISTRATION FORM – EYEBROW SCULPTING / FEATHERING

Name		Phone	
Address	Postcode		
Email		Occupation	
DOB		Emergency Contact	
Credit Card No		Expiry date	
Signature		Today's date	

Please note that we require your credit card details to secure all bookings. We require 24 hours' notice for change or cancellation. Should you not give 24 hours' notice, a cancellation fee of 50% of your treatment price will be charges to cover staff costs.

Change desired to your brows...

Shape Thicker Thinner
Colour Darker Lighter

Further Comments

DISCLAIMER

If I experience any pain or discomfort during any session, I will immediately inform the staff member performing the service so that all necessary analysis, examination and / or adjustments can take place to ensure client safety and comfort. I further understand that any staff member's advice should not be construed as a substitute for a medical examination, diagnosis, or treatment. I understand that staff members are not qualified to perform eye examinations diagnose, prescribe, or treat any eye or eye area conditions and that nothing said in the course of session given should be construed as such. Staff members should not perform under certain medical conditions, I affirm, that I have stated all my medical conditions, and answered all questions honestly. I agree to keep Beauty Bar & Lash Bar Pty Ltd and all or any Beauty Brow & Lash Bar employees should I fail to do so. I understand illicit or sexually suggestive remarks or advances made by me will result in the immediate termination of any session. I understand that any Beauty Brow & Lash Bar staff member reserves the right to refuse to perform any procedures on anyone who he/she deems to have a condition for which the procedure/s has contradiction to. I understand that any contradictions or allergic reactions to any service provided by staff members will occur within 24 to 48 hours following any services provided, after this time I agree and acknowledge that Beauty Brow & Lash Bar Pty Ltd will not be responsible or liable for any complications.

Signature: _____ Date: _____

CLIENT ANALYSIS – SALON USE ONLY

Current Condition of Brows (details of current shape or gaps)

Design Guide

Shape: High Arch Full Arch Classic Arch Petite Arch
Finish: High Arch Full Arch Classic Arch Petite Arch
Processing: On & Off 2 minutes 5 minutes Longer