BloodOath Tattoo - Tattoo Consent & Release Form

Complete and sign before any tattooing begins. Signing gives up legal rights; ask your artist about anything unclear first.

Name _____ Date of birth _____ Today's Date _____

Address _____ Phone _____ Email _____

Emergency contact _____ Artist _____

☐ ID copied

Health: List any medical condition, medication, or recent surgery your artist should know about, including blood-borne conditions such as HIV or hepatitis, diabetes, heart conditions, bleeding or clotting disorders, blood thinners, seizures or fainting, keloid scarring, chemotherapy or radiation, skin problems at the tattoo site, or pregnancy. Write "none" if none apply.

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Allergies. List every allergy or sensitivity you know of, including CBD, medical tape or adhesive wrap, latex, inks or pigments, metals, numbing agents, antibiotic ointment, soaps, or antiseptics. Write "none" if none apply.

_____

I have read and agree to all of the following:

_____ Age. I am 18 or older and have shown valid government photo ID, which the shop may copy and keep. Iowa prohibits tattooing anyone under 18, with no parental-consent exception, and I accept responsibility for any false ID or date of birth I give.

_____ Disclosure. My health and allergy answers above are complete and truthful, and the shop is relying on them.

_____ Infection. Infection is a known risk of tattooing. BloodOath Tattoo, its owners, employees, and artists are not liable for any infection or complication, including one caused by my aftercare, environment, activities, or health, except one caused by the shop's own failure to follow required sterilization and sanitation practices. I will see a licensed medical provider promptly for any sign of infection.

_____ Other risks. I voluntarily accept the risks of allergic reaction, swelling, bruising, scarring or keloids, ink blowout, migration, patchiness or fading, pain and fainting, permanent change to my skin, effects on future MRI imaging or blood donation, and reactions no one could reasonably anticipate.

_____ Design and spelling. I reviewed and approved the artwork, stencil, and placement, and proofread every word, letter, date, and numeral. The shop is not liable for any spelling, grammar, wording, date, symbol, or translation error in a design I approved, and I get no refund, free correction, or cover-up for one. If I supplied the artwork or text, I have the right to use it.

_____ Permanence and payment. A tattoo is permanent, healed results vary, and no specific result is guaranteed. Deposits are non-refundable, payment is due each session, and completed work is not refundable. The shop may refuse or stop any procedure at any time.

_____ Aftercare. I received written aftercare instructions and understand that once I leave the shop, healing is my responsibility and no one here is a medical professional.

_____ Release and indemnity. I release BloodOath Tattoo, its owners, employees, artists, apprentices, guest artists, and the property owner from all claims arising from this tattoo, including ordinary negligence; I agree to indemnify them and not to sue. This does not release gross negligence, recklessness, willful misconduct, or any liability Iowa law does not allow to be waived. This agreement binds my heirs and assigns, is governed by Iowa law with venue in Dallas County, Iowa, survives if any part is struck, and is the entire agreement between us.

_____ Capacity. I am not under the influence of alcohol or drugs, no one pressured me to sign, I may stop the procedure at any time and still owe for work completed, and my questions have been answered.

Client signature _____ Print _____ Date _____

Artist signature _____ Print _____ Date _____