Photo Consent & Release (optional)

Parlor Beauty & Wellness Collective | 6100 E Central Ave, Suite 215, Wichita, KS 67208 | (316) 201-6255

Separate and optional: consent for before-and-after photographs. Declining changes nothing about your service.

What to Know

- ☐ Photographs document your treatment progress in your confidential file.
- ☐ Nothing is published anywhere without the separate written permission below.

I Confirm That

- ☐ I consent to treatment photographs for my confidential guest file.

OPTIONAL PUBLICATION PERMISSION - initial only if you agree: ____ I additionally permit Parlor to use my treatment photographs for education or promotion, without my name, and I may withdraw this permission at any time by telling Parlor in writing.

For your safety, tell us about all medications and supplements (including aspirin, ibuprofen, fish oil, antibiotics, and retinoids), skin conditions, allergies, recent or planned sun or tanning-bed exposure, self-tanner use, pregnancy or nursing, and recent cosmetic procedures. Undisclosed conditions and medications are the most common cause of poor outcomes.

Results vary with skin type, age, hormones, health, home care, and consistency with the treatment plan. Honest work is promised; specific outcomes are not guaranteed.

I have read this form, had the chance to ask questions, and I answered the health questions truthfully. I understand the information above and consent to the service described.

Guest name (print)	Date of birth
Guest signature	Date
Practitioner	Date