

**ADDICTED2TATTOOS**  
8820 N. Florida Ave.  
Tampa, FL 33604  
813-936-8282

Please initial all lines below, then fill in your  
information and sign this form.

Date: \_\_\_\_\_

## TATTOO RELEASE FORM

\_\_\_\_\_ I am at least 18 years old.

\_\_\_\_\_ I do not have epilepsy.

\_\_\_\_\_ I do not have hepatitis.

\_\_\_\_\_ I am not a hemophiliac (bleeder).

\_\_\_\_\_ I do not take blood thinners.

\_\_\_\_\_ I do not have a heart condition.

\_\_\_\_\_ I am not under the influence of drugs or  
alcohol.

\_\_\_\_\_ To my knowledge I don't have any  
physical, mental or medical impairment, condition, or  
disability which might affect my wellbeing as a direct  
or indirect result of my decision to have any tattoo-  
related work performed on me.

\_\_\_\_\_ I agree to follow all instructions concerning  
the care of my tattoo while it is healing and  
afterward.

\_\_\_\_\_ I agree that any touch-up work needed,  
due to my own negligence, will be done at my own  
expense.

\_\_\_\_\_ I understand that if my skin color is darker,  
the colors will not appear as bright as they do on  
light skin.

\_\_\_\_\_ Being of sound mind and body, I hereby  
release any and all persons representing  
Addicted2Tattoos from all responsibility, now and in  
perpetuity.

\_\_\_\_\_ I accept any and all responsibility myself  
for any consequences that might stem from my  
decision to have any tattoo-related work done by a  
representative of Addicted2Tattoos.

\_\_\_\_\_ I agree for myself, my heirs, assigns, and  
legal representatives to hold harmless from all  
damages, actions, causes of action, claim  
judgments, costs of litigation, attorney's fees, and all  
other costs and expenses which might arise from my  
decision to have any tattoo-related work done by a  
representative of Addicted2Tattoos.

\_\_\_\_\_ I agree to leave the premises of  
Addicted2Tattoos, or any other establishment where  
Addicted2Tattoos is engaged in business, promptly  
upon request, for any reason whatsoever, by any  
agent or employee of Addicted2Tattoos.

\_\_\_\_\_ I agree to pay for any and all damages or  
injuries to any and all persons and property  
belonging to Addicted2Tattoos, or any other person  
to whom Addicted2Tattoos and representatives may  
become liable contractually or by operation of law,  
caused by, or resulting from my decision to have  
any tattoo-related work done by a representative of  
Addicted2Tattoos.

\_\_\_\_\_ I agree that these waivers also pertain to  
and are designed to protect any and all  
establishments where Addicted2Tattoos conducts  
business.

\_\_\_\_\_ I have read and understood each of the  
above paragraphs.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Apartment or suite: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_  
(include area code)

Email: \_\_\_\_\_

\_\_\_\_\_ I agree to receive email from  
Addicted2Tattoos. I understand that  
Addicted2Tattoos will not share my information in  
any way, except as required by law, with any 3<sup>rd</sup>  
parties.

**All tattoos must be paid in advance of process.**

**\_\_\_\_\_ All clients must present valid ID, and  
agree to being photographed by  
Addicted2Tattoos agent.**

**\_\_\_\_\_ Photos will be used in portfolios and  
as promotion for Addicted2Tattoos. I agree to  
release my pictures for any use by  
Addicted2Tattoos.**

**\_\_\_\_\_ I AGREE THIS SHOP HAS A NO  
REFUND POLICY ON TATTOOS, PIERCINGS  
AND/OR RETAIL SALES AND I WILL NOT ASK  
FOR A REFUND FOR ANY REASON  
WHATSOEVER.**

Artist name: \_\_\_\_\_ Location of Tattoo: \_\_\_\_\_

Notes: