

*Christian Roberts Salon and Spa*

**NOVALASH EYELASH EXTENSIONS**

**Client Consent Form**

1. I agree to use only recommended products on my NOVALASH Eyelash Extensions.
2. I understand that there are many variable, including technician expertise, natural lash growth cycle, use of cosmetics and skin care products, and the overall maintenance given that will influence how long my NOVALASH Eyelash Extensions remain in place.
3. I acknowledge that I should not pull on my lashes after they have been applied.
4. I understand that if a NOVALASH Certified Lash Extensionist does not apply NOVALASH extensions properly there is a risk of eye damage and harm to my vision.
5. I understand that there is a potential possibility of allergic reaction - - as with all cosmetic products.
6. I have been advised that using mascara on a regular basis will shorten the length of time my extensions remain in place. I have also been advised not to use waterproof mascara on my NOVALASH Eyelash Extensions.
7. I understand that touch- up appointments may be necessary as soon as two to three weeks after the application and that there is a fee for this procedure.
8. I acknowledge that by signing this Consent Form, it will act as solid proof I have read and understand the terms above and verbalized, for today and any future appointments I have using NOVALASH Eyelash Extensions.

I, \_\_\_\_\_, authorize \_\_\_\_\_  
to apply NOVALASH Eyelash Extensions to my lashes.

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

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

NOVALASH Certified Lash Extensionist Signature : \_\_\_\_\_

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