Client Release and Informed Consent Form

PLEASE READ THE FOLLOWING INFORMATION AND ACKNOWLEDGE THAT YOU UNDERSTAND AND ACCEPT ALL THE PROVISIONS BY SIGNING BELOW.

We Reserve the right to refuse service to anyone.

By signing this permission/consent form you are allowing Salon Daidree to perform a chemical service on either yourself or a child under the age of 18 years old. We pride ourselves in our level of skill and the products we use, as the salon has kept long lasting relationships with our satisfied clients. Here are some tips that can make your service more successful:

1. Chemical Services can have varying results based on your individual hair. Each individual has a different underlying pigment weather its red, blonde, warm tones or cool tones the hair has to eat through the middle stages which usually are the red stages to get to the cool blondes and the cuticle can only open up so much at a time, with that is why going lighter is a process, have to wait for the cuticle to close to be able to open it up again to go lighter.

It is extremely important that you make your stylist aware of any and all processes you have used on your hair in the past months. The following things have an effect on the hair:

- Well water/hard water,
- Boxed colors & dyes, porous bleached hair if bleached more than 2X in a month.

2. Hair lightening is like getting a tan: you can’t go outside one time and expect to be the darker color you desire. It’s a process to slowly get there without burning your skin and the same is for the hair if you want to keep it healthy.

Liability Waiver:

I have been made aware by ___________________________________ A technician at Salon Daidree that I am choosing to receive_________________________________________ Service. I have made my stylist aware of all the processes and procedures I have used on my hair in the past few months to assist their assessment of my hairs current status and the process that I need to achieve my desired results. I realize this is very important information and that any information withheld regarding my previous processes will increase my chance of damage and the potential for unpredictable chemical reactions. Chemical processes may cause some damage to the integrity of my hair, there are products recommended to improve the health of my hair as well as maintain the results after the service. (Your stylist can recommend these products.) I am aware that my stylist has been
trained in the service techniques and that they will do there absolute best to create the best results, I understand each person’s hair, their color and their cut varies person to person so my hair won’t look exactly like the picture shown but to the best my hair can do it will be comparable to the picture. Therefore as an ongoing basis I will not hold liable Salon Daidree or my stylist if the process has unexpected or undesired results.

Signing this slip states that you agree to the terms and conditions discussed with you and your stylist and Salon Daidree is not responsible for results because every persons hair is different we cannot predict the tone it grabs until a test patch. If hair has red, black or fashion colors to begin with and you want to go lighter there is no guarantee the Color will bleach out of the hair, it’s a process it has to go through all stages before it reaches to the blonde (stylist will show you color wheel and the stages of lightening chart) we will not guarantee you will be lighter in one day, it will take a few appointments, so in the event your hair is not the color you expected you need to come back to continue the process, and Salon Daidree is not responsible to pay for the process of you going lighter, each appointment you will be charged as expected for the lightening color correcting process due to the cost of supplies and labor fees.

I have read the terms and conditions above and by signing my name I agree to the service.

Signature: ____________________________  Date: ________________.

Parent or guardian if under 18:

Signature: ____________________________  Date: ________________.

Technician’s Signature: ____________________________  Date: ________________.

Technician’s Comments: