

Glamour Puss  
Parent / Guardian

## Treatment Consent Form



This form confirms that I give permission for *(insert child's name)*

To receive the following treatments

- ✓ Manicure / Hand Massage
- ✓ Pedicure / Foot Massage
- ✓ Nail Art
- ✓ Glitter Tattoo
- ✓ Glitter Hair Spray
- ✓ Face Gems

Please advise if your child has any known allergies or is allergic to anything that may affect their treatment.

Please note that unfortunately treatments will not be carried out on children with cracked sore skin, verruca's or warts.

Parent/Guardian Name

Parent/Guardian Signature

Date

We would be very grateful if you would tick this box to give us permission to take photos of your child and use these in our printed and online publicity