

SHAMAN MODIFICATIONS, LLC

PARENTAL CONSENT FORM

Under penalty of perjury, I, the undersigned, declare the following:

- (name of minor being pierced) _____ is my minor child
- I have the authority to consent to the body piercing of my child
- I have presented identification of myself and my minor child to the staff of Shaman Modifications
- I agree to remain present with my minor child during the entire body piercing procedure.

I acknowledge by signing this release that I have been given the full opportunity to ask any and all questions I might have about obtaining a piercing from Shaman Modifications.

I acknowledge that all my questions have been answered to my total satisfaction. I specifically acknowledge I have been advised of the facts and matters set forth below, and I agree as follows:

I acknowledge that I have been notified of the possible risks and dangers associate with receiving a body piercing. These risks and dangers include, but are not limited to, the following:

1. The possibility of discomfort or pain
2. The possibility of scarring
3. The possibility of bleeding
4. The possibility of swelling
5. The risk of infection (particularly in the event that I do not take proper care of the piercing)
6. The possibility of nerve damage
7. The increased risk for adolescents during certain stages of development.

I agree to release and forever discharge and forever hold harmless Shaman Modifications, its associates, agents, officers, and shareholders from any and all claims, damage, or legal actions arising from or connected in any way with my piercing or the procedures and conduct used to complete the piercing procedure.

SIGNATURE: _____ DATE: _____ PHONE: _____

State of _____ County Of _____

The forgoing instrument was acknowledged before me
this _____ Day of _____, 20____, by

Notary name here,