



Letter of Agreement – Body - Piercing

To be filled out by our staff:

<u>Part of the bodypiercing:</u>	<u>Kind of piercing:</u>	<u>Charge:</u>	
Is there a piercing done by the law BGBl 141 §2 Abs. 1 (est healing 24 days)		yes	no

General information:

First name, last name: Hereafter called „me“ *	
Day of birth:	
Address of living:	
Legitimation and of full age, confirmed by ID (kind/number)	
Telephonenumber:	
E-Mail:	
From where do you know us?	
Do you want a YouTube video or photo for our websites / platforms?	

The body-piercing is only allowed to be done, if no references to any possible contradictions are presented. Therefore it's a must to answer the following questions truthfully.

Please mark the Contrainikation following options truthfully:

1. Diseases:	Yes	No	Notes:
Hepatitis A,B,C,D,E,F			
HIV-Infektionen (AIDS)			
Hämophilie (blood disorder)			
Diabetes Mellitus (diabetes)			
Eczema			
Immune mediated disease			
Blood thinning therapy			
Sexually transmittable disease			
Acute febrile infection			
Herpes			
Epilepsy			
Diverse skin disease (if so, which ?)			
Other chronic or acute disease (if so, which?)			
Congenital Immune - deficit diseases (if so, which?)			
Other causes for immunosuppression (Suppression of the immune system through medicine?)			
Other diseases (if so, which?)			
2. Allergies:	Yes	No	Notes:
Disinfectant / Anesthetic (Lidocain)			
Latex / other plastics			
Nickel / metal			
Alcohol			
Other allergies (if so, which?)			
3. Health & well-being	Yes	No	Notes:
Low blood pressure			
Raised blood pressure			
Blackout & circulatory collapse			
Do you have any problems with your heart			
Are you pregnant ?			
Did you use: Drugs, alcohol or other kind of medicine?			
Other health problems (if so, which?)			

Advice for the customer:

By not following the rules of hygiene, complications could occur. In case of a complication after getting the piercing, it is very much advised to visit a doctor. Please don't remove the piercing by you, since can cause

Diverses:

Used Materials / Chargen 2018

Complications / Notes:

injuries or any kind of other infection. The removal or the change of a piercing should only be done by the piercer him/herself. A reattachment of a self removed piercing cannot be done, since that can cause infections or injury at the place.

With my Signature I confirm the following:

- I am in full power of my mind and agree that a piercing is allowed to be done to my body.
- I have been informed over the treatment afterwards, risks and care about the piercing. I was given a written explanation of care rules for my piercing, a copy of my declaration of agreement and the used material numbers, also a short explanation about the done service.
- I understand that even through professional work and the following of the hygiene rules, infections or other problems can occur.
- I confirm that I have read the declaration of agreement and to have understand it, and that I have answered all the questions truthfully, for not knowing allergies and any affects thereof I am self responsible.
- I have been explained, that a piercing by law counts as an assault and that I totally agree to the body piercing - act (self responsible).
- I accept that the Trend Agent GMBH takes no liability for the piercing and the healing process, and as such will not make any charges against the company.
- I had enough time to rethink my decision.
- I have used an anesthetic myself to numb the body and I am not allergic to it

• I irrevocably agree to the publication of a photo / video and assignment of image / video and audio rights free of charge:

Yes	No
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I* (see above), agree that my data includes: name, date of birth, address, email, social media name, credentials, telephone number, documentation of treatments, contraindications for performing treatments, maintaining contacts, sending promotional material about products and services, reminders, Date evaluations, data evaluations by Trend Agent GmbH, processed and stored for 30 years. I agree that the enumerated data will be forwarded to the company Shore Seidlstr. 23, 80335 Munich, about which I booked the appointment online or locally or via telephone. If the appointment was made by phone / local I agree backdated to the storage of my data. I agree that I receive mailings, including commercial mailings, via e-mail, social media and / or telephone. This consent can be revoked at any time under revocation@trend-agent.at stating my data. The consent to this I give to all other mentioned also with my signature. **

Date :	Signature:
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To be filled out by the legal guardian: (not necessary in terms of BGB 141 §2 Abs. 1)

Agreement declaration by the legal guardian:	
Herewith I confirm, to have read and understood the above stated rules. As the Guardian of the person of under age, I agree for the piercing to be done. I agree with the mentioned data processing ** of my data and those of my children s.o. I fully agree and also give my child the power of attorney to decide whether it agrees to the transfer of the video / sound and image rights in the Internet / Social Media according to a separate declaration of consent.	
First name, last name:	
Legimitation and of full age, confirmed by (kind/number):	
Date:	Signature:

Diverses:
 Used Materials / Chargen 2018
 Complications / Notes: