

To ensure your eyelash extensions stay beautiful and long lasting, proper care and maintenance are required. Please read carefully the following recommendations.

It takes up to 24 hrs. for the eyelash extensions adhesive to fully cure. To avoid premature partial or fully loss of your extensions, for the next 24 hrs. DO NOT:

- Expose your eyelash extensions to water.
- Rub, tug or play with your extensions.
- Apply any cosmetics (specially oil based) near your lash line.
- Expose your lash extensions to extreme heat such sauna, facial steamers, etc.

After the first 24 hrs. have passed, follow the guide below:

- Wash your eyelashes daily with a non-oily face wash (a drop of shampoo mixed with water will do the job). It is important to clean your lashes thoroughly. A buildup of dust, makeup and/or natural skin oil on the lash line affects the durability of the eyelash adhesive and could also lead to potential skin problems around your eyes.
How to clean your eyelash extensions:
 1. Splash your eyes with warm water.
 2. Using your ring finger, gently massage your cleansing product along the lash line and eyelashes, then splash with water until all the soap is rinsed away (avoid direct contact when rinsing your eyes from the shower head water pressure).
 3. Pat dry the skin around your lashes with a dry towel and let your lashes air dry.
 4. Once dry, use a disposable mascara wand to gently brush them to separate your extensions.
 5. Do not worry if you see 1 or 2 lashes have fallen out. We normally lose 1-5 of our own natural lashes every day without noticing.
- DO NOT use any oil based products such as makeup remover or any type of oil near the eyes. Oils can break down the adhesive and can cause your extensions to come off, use water based products only.
- DO NOT use an eyelash curler.
- DO NOT tint or perm your lashes while you have lash extensions on.
- DO NOT use waterproof mascara. Some ingredients in mascara can break down the adhesive and can cause your extensions to prematurely come off.
- DO NOT tug or pull your eyelashes as this will cause damage to your natural eyelashes.
- DO NOT try to remove the extensions with household products, this will cause damage or lose of your natural lashes. If you don't want to wait until all extensions have fallen out on their own, schedule an appointment with us to properly remove them.
- AVOID extreme heat such sauna, facial steamers, etc., direct heat will damage your extensions.
- You might have to adjust your sleeping position. Sleeping on your side or stomach may damage your extensions if your eyelashes are constantly rubbed against your pillow.
- When coming for your infill appointment, ensure your eyelashes are clean and free of mascara and makeup. It is not possible for us to give your lashes a thorough cleanse and any residue will prevent proper bonding of the extensions when performing the infill, resulting in premature loss of your extensions. If you wish to wash your eyes in the salon before your appointment, please arrive 15-20 minutes before your appointment time.
- Schedule your infill appointments every 2-3 weeks to keep your eyelashes looking full and beautiful, which will help you keep the infills cost low.

ENJOY YOUR BEAUTIFUL EYELASH EXTENSIONS!!!!



EYELASH EXTENSIONS INTAKE & CONSENT FORM

CLIENT INFORMATION:

Name: _____	Date: _____
Address: _____	City: _____ State: _____ Zip: _____
Phone: _____	Email: _____

Referred by:

Name

Appointment Date: _____ Time: _____

Your Certified Lash Specialist is: _____

Naturalash™ is our trusted professional product line for lash extensions. We carry a variation of lengths, thicknesses and curl type of eyelash extensions. Your technician, after the consultation and examination of your natural lashes, will determine and recommend which ones will best suit you. Please understand that in some cases it is not possible to achieve the look you want due to the amount, size and thickness of your own natural lashes.

The eyelash extensions procedure is performed in a private room, you will be laying down on your back with your eyes closed for 2 hours or more. The extensions are bonded one by one to your own natural lashes. It is normal to experience burning or stinging for a few minutes when you open your eyes after the application or removal of the eyelash extensions. If the irritation does not disappear or is worsen, please contact us immediately to remove the extensions (do not attempt to remove them on your own or with any product). Also, it is important not to have interruptions during the application to avoid extending the application time, also please avoid the following:

1. Do not wear any makeup around your eyes, specially mascara and eyeliner.
2. Don't bring kids with you to your lash extensions appointment.
3. Avoid the use of your cell phone (except in case of emergency).
4. DO NOT try to open your eyes during the procedure.
5. Avoid drinking a lot of liquids before your appointment.
6. Use the restroom before your appointment.

Please answer the following questions to the best of your knowledge and as accurate as possible to achieve beautiful and long lasting extensions. **This information will determine if you are suitable or not for eyelash extensions.**

CONDITION	ADVERSE REACTIONS	YES	NO	DON'T KNOW
Do you suffer from sensitive eyes or constant eye infections?	The constant rubbing or touching your eyes, as well as excessive tearing or eye secretion can cause damage to the eyelash extensions and your natural eyelashes.			
Are you allergic to adhesives or its ingredients (glues, tapes, band aids, etc)?	During the application of eyelash extensions adhesives, medical tape and gel pads are used and may cause allergic reaction.			
Do you have a cold or flu or suspect you are getting it?	Tearing eyes prevents the adhesive to properly bond the eyelash extensions. Also, symptoms of cold and/or flu, such as running or stuffy nose may worsen when laying down.			
Do you wear contact lenses?	Adhesive used to apply the extensions may get underneath the contact lens and can cause corneal abrasion or scratching. CONTACT LENSES MUST BE REMOVED PRIOR EYELASH APPLICATION PROCEDURE.			

Do you use eye drops? Prescribed or over-the-counter?	Excessive moisture around the eyelash line and some of the ingredients in eye drops can cause premature loss of your eyelash extensions. Extra care is necessary to prevent constant moisture in the eyelash extensions.			
Do you suffer from extremely oily skin and hair?	Excessive natural or artificial oils can break down the adhesive used to apply the lash extensions.			
Have you had Lasik Surgery in the last 4 months?	Eyes may have sensitivity to eyelash extensions and the products used for prepping the eye area.			
Are you taking Thyroid medication?	Thyroid disease and some medication to treat it, can cause weakness of hair follicles and/or hair loss. The eyelash extensions may be too heavy for weaken eyelashes and can cause damage to your natural lashes.			
Have you had Chemotherapy in the last 6 months?	Chemotherapy can cause weakness of hair follicles and/or hair loss. The eyelash extensions may be too heavy for weaken eyelashes and can cause damage to your natural lashes.			
Have you had Blepharoplasty (eyelid lift) in the last 6 months?	Eyes may have sensitivity to eyelash extensions and the products used for prepping the eye area.			
Do you suffer from Hormonal Imbalance or Extreme Stress?	Hormone Imbalance and Extreme Stress can cause weakness of hair follicles and/or hair loss. The eyelash extensions may be too heavy for weaken eyelashes and can cause damage to your natural lashes.			
Have you had any major surgery in the last 6 months?	Some medication can cause weakness of hair follicles and/or hair loss. The eyelash extensions may be too heavy for weaken eyelashes and can cause damage to your natural lashes. Also the time necessary to apply the extensions can be extensive and may cause discomfort.			

CONSENT FOR EYELASH EXTENSIONS APPLICATION PROCEDURE:

I have agreed to have eyelash extensions applied and/or removed from my eyelashes by a qualified professional at Distinctions Salon. Before the procedure can be performed, I understand I must complete this agreement and provide my informed consent by signing and dating where indicated below.

For valuable consideration, in order to have eyelash extensions applied and/or removed from my eyelashes at Distinctions Salon:

1. Waiver of Liability. I understand there are risks associated with having artificial eyelashes applied to and/or removed from my existing eyelashes, and that notwithstanding the utmost of care in the application or removal of this products, there still exist risks associated with the procedure and product itself, which include, without limitation, eye irritation, eye pain, discomfort, and, in rare cases, blindness when improperly handled. As part of this procedure, I understand that a certain amount of eyelash adhesive material will be used to attach the artificial lashes to my existing eyelashes. Even though the Professional may apply or remove the extensions properly, I understand adhesive material may become dislodged during or after the procedure, which may irritate my eyes or require further follow-up care at my own expense, to prevent damage to my eyes. I also understand there is more than one technique for applying eyelash extensions to my eyes, and I will not attribute any liability to the Professional or Mantana Enterprises DBA Distinctions Salon as a result of this procedure or the use and care of these lashes. I also agree to defend, indemnify and hold harmless the Professional and Mantana Enterprises DBA Distinctions Salon from any and all claims, actions, expenses, damages and liabilities, including reasonable attorneys' fees which might be asserted against them as a result of my having this procedure performed, or my purchase of these Naturalash™ products at Distinctions Salon. As used in this agreement, the terms "Professional", "Distinctions Salon" and "Mantana Enterprises DBA Distinctions Salon" include all of their respective officers, directors, agents, employees, successors and assigns.

2. Permission to Use Pictures. I hereby grant to Professional and Mantana Enterprises DBA Distinctions Salon the full right to take, publish and reproduce photographs of me, my face, my eyes and/or eyelashes, both before and after this procedure, for any advertising, education, or other purposes whatsoever, including the right to retouch these photographs as deemed necessary by Professional and Distinctions Salon. I further expressly assign any copyright in these photographs to Mantana Enterprises DBA Distinctions Salon. I also grant my consent for Professional and Mantana Enterprises DBADistinctions Salon, to use my image and likeness as contained in these photographs for any advertising or other purposes, along with any comments I may provide. Please use these images with the following:

my own name no name to be used a fictitious name: _____

3. Care and Maintenance. I agree to follow the care and maintenance instructions provided by Distinctions Salon and/or Professional for the use and care of my eyelash extensions, and that if any follow up care is required due to my own mistake or negligence, or failure to follow up these instructions, this will be at my own expense and risk. I understand that if I neglect the following, it may result in damage to my eyelash

extensions or may cause my lashes to fall off prematurely: I will avoid oil based products in my eyes, I will avoid getting my lashes wet within the first 24 hrs., I will avoid using waterproof mascara, I will avoid saunas and steamers. Knowing this, I agree to follow the aftercare tips provided in the After-Care Guide for best results. If I experience any itching or irritation, I agree to contact Distinctions Salon immediately to have the lash extensions removed. I agree that I should not attempt to remove my lash extensions on my own or with any product, but that the removal procedure requires to be done professionally.

4. No Known Medical Conditions / Informed Consent. I have read and completed the Distinctions Salon Client Intake Form in its entirety and in truth. I acknowledge that I have been advised of the potential harmful or negative side effects (such as the premature shedding of my eyelashes) that the lash extension procedure or removal may cause to those who have specific medical or skin conditions. I understand that the adhesives and adhesive remover are a skin, eye and mucus membrane irritant that in rare cases persons may be allergic or have hypersensitivity to synthetics, cyanoacrolate or formaldehyde which in small amount may be present in the adhesive. I understand that the procedure requires that I lay still for up to 2 hours or longer with my eyes shut, and that if I wear contact lenses, I must remove them for the duration of the lash extension application or removal. I further state that I have no known medical condition that might be aggravated by the procedure or any medical condition that would prevent me from complying with or heeding to the Professionals' or Distinctions Salon's instructions or these warnings.

If any action is brought to enforce the terms of this Agreement, the prevailing party shall be entitled to its costs and reasonable attorneys' fees. Any claims arising out of this agreement will be resolved through binding arbitration using the rules of the American Arbitration Association.

This Agreement will remain in effect for this procedure, and all future procedures conducted by the Professional or any other technician conducting business at the establishment of Distinctions Salon located at 2240 N. Scottsdale Rd. Suite 2, Tempe AZ 85281.

I agree that this Agreement is binding upon me, and my heirs, legal representatives and assigns. I represent that I am over 18 years of age and that I have the right to enter this agreement, or if I am under 18 years of age, I have had my parent or legal guardian consent to this agreement, and his or her relationship to me is as follows:_____. By his or her signature below, he or she ratifies and consents to this procedure under these terms.

Signature:_____ Print Name:_____ Date:_____

Parent/Guardian Signature:_____ Print Name:_____ Date:_____