

Dear Guest,

You have chosen to receive a chemical color service with us. Here at Moxy Hair Studio we pride ourselves on our level of skill and long lasting relationship with our guests, which are achieved by intensive training, continuing education, and the use of high-grade products designed to respect both our guests and the environment. To ensure your satisfaction and safety, we ask you to read and sign this industry-standard waiver. Because lightening, color, and chemical services can have varying results based on your individual hair, it is extremely important that you make your stylists aware of any and all processes you have used on your hair, as well as relevant medical conditions & treatments.

Examples include but are not limited to:

1. Previous color or chemical treatments, both professional & at home
2. Pregnancy/Hormone treatments
3. Allergies
4. Medications

We want you to feel comfortable contacting Moxy Hair Studio at any time after your service if you have any questions or concerns.

Hair color/lightener liability waiver:

I am choosing to receive one of the following services: hair color or lightener. I understand that chemical processes may compromise the integrity of my hair. I understand that Moxy is not responsible for any medical or cosmetic reactions I may have as a result of the service I requested. I understand that my stylist has the right to refuse to perform a service if they believe it would compromise my hair.

I understand that a quoted price is just that, and may have to be adjusted once the service is underway due to product usage, porosity of hair, condition of hair, etc. Your stylist will make you aware of addition services that may need to be performed to achieve your desired look.

\$ _____ (Quoted price) _____ (Initials)
Service Requested _____ Service Suggested _____
Service agreed upon _____

By signing below, I, the guest, agree to have read, understand, and accept the terms of this waiver. Please note that if you are 18 or younger, a parent or guardian must sign this document. This document will be kept on file for future services.

Thank you,
Moxy Hair Studio & Spa

Guest Signature: _____ Date: _____
Parent/Guardian Signature: _____ Date: _____
Stylist Signature: _____ Date: _____

Mandatory Documentation:
_____ Before Picture
_____ After Picture
_____ Inspiration Picture