



Consent Form

Please complete this form and send hard copy with your child with your child. TPM cannot commence in the absence of signed consent.

Date of booking and package.	
Name of Parent / Guardian [Print]:	
Name of Child [Print]:	
Child DOB :	
Home Address and postcode:	
In case of emergency please contact Mobile:	
Email Address:	

All treatments are child friendly and products are water based. Does above named child suffer from any medical conditions, skin conditions or food allergies? IF SO, PLEASE LIST HERE:

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Does the child client have any special needs or hidden disabilities? Do you require the hosts to make any special adaptations? IF SO, PLEASE LIST HERE:

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I confirm that I am the parent or guardian of the above-named child. I agree for my child to partake in the package named on the e-party invitation. I confirm that my child does not suffer from any medical, skin or food allergies other than those listed above. I am happy to be contacted by TPM. If my child appears unwell during the booking, I agree to collect my child. I understand that the VIP package is a photography-based package and I am happy for my child to partake in all aspects of the package unless stipulated otherwise below. I understand that imagery may be posted on TPM's social media channels will be compiled into a reel, the link to which shall be provided to the booking parent. Data will be stored in accordance with GDPR and shall not be passed to any third party. TPM accepts no responsibility for loss, damage or injury caused to the client or their property. Information supplied in this form will be treated with the strictest of confidence. **PLEASE LIST ANY OBJECTIONS IN BOX BELOW (if any):**

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Parent / Guardian Signature:

Date: