



AK Care
375 Howden Blvd. Unit 2
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Parental Consent to Minor (Below 18 Years)

I, _____, the parent or legal guardian of
(minor's name) _____, hereby give my consent to AK Care aesthetician to
perform (skincare procedure) _____ on my minor child.

I hereby confirm that I have read and understand all information on the consent form for this treatment or service, and accept responsibility on my child's behalf for any disclosures or liability described on those forms.

I agree and commit to supervise my child's home care protocol recommended by the aesthetician as part of the treatment plan.

Full name of parent or guardian: _____

Signature of parent or guardian: _____

Signature of aesthetician: _____ Date: _____

This form must be signed in person by the parent or guardian at the time of service, witnessed by the aesthetician.