Q.o.R								
	₹:	TI.	G.P	Stone	WITH AN APPOINTMENT IS THE MAX. WAITING TIME 20 MINUTE:	s.		
B.C.R								
.B.B					I MADE AN APPOINTMENT AT (TIME):			
B.B.L								_
BAN.								
)erm	nal	Small	Big					
hoo	ting				* Please note to our staff if you made	de an	appoi	ntment.
eft /	right		•		-			
D check	··							
		hat vou (CAN NO	OT swim	or go to a sauna or solarium, for 6 weeks with y	our fı	resh pla	iced piercing!
					Type Piercing:			
igne	d by, ((fill in yoเ	ur nam	e)	,	will d	leclare t	the following:
: т	Tha da	aisian ta	~~t ~:	a.d :a	sansidared and made out of free will			
					considered and made out of free will. Ire I was not under the influence of drugs nor alco	shol		
			•	•			d of irri	tation on my bod
					ny discoloration, swelling nor bumps, nor any othough to get pierced.	er Killi	u oi iirii	lation on my boo
		-		•		نم منط		and accompanies
					radiotherapy on the placement were I would like t	ınıs pı	ercing a	and currently
ı	m noi	t using ar	ıy anıı-	coaguia	ting medication.			
ID. 1	No do	m/+			the second second due to the increased risk	~£:~£	ations.	
ID. V	ive doi	ii t recoii	iiiieiiu	pregnan	t women to get pierced due to the increased risk	oj irije	ections.	
	laura un			سمسمم علما	olications and as these 2			
	Have you got any health complications such as these? (Tick off the wrong answers and/or circle the correct answers)							
(TICK O	ff the wro	ong an	swers an	nd/or circle the correct answers)			
: г	Diabet	es	(suga	r defect)			Yes	No
		ophilia	. •		ot want to clot)	•	Yes	No
	Contact allergies (like nickel or Latex)				-		Yes	No
		_			HIV and other chronic and rheumatic conditions)		Yes	No
		and vascu			The and other emonic and meanage conditions,		Yes	No
-	near t	anu vasci	ılal üe	viarice		•	162	NO
۱	am av	ware tha	t placii	ng a pier	cing will not be recommended if i ticked off Yes	one o	r more	times
		_			ng information on paper			
	After-c			•	cings including the average healing time of the sp	ecific	piercin	g
- 4		t getting	a piero	cing				
- 4	Risks o	, Secuilo						
· <i>F</i>			nation:					
: <i>A</i> : F : F	Person	al inform			Date of birth			
: <i>A</i> : F : F	Person Name:	al inform			Date of birth			
: <i>A</i> : F : F	Person Name:	al inform			Date of birth Zip code / Re			
F F	Person Name: Adres:	al inform						
F F	Person Name:	al inform						
F F	Person Name: Adres:	al inform						
F F	Person Name: Adres:	al inform						
F F	Person Name: Adres:	al inform						
F F	Person Name: Adres:	al inform						
F F	Person Name: Adres:	al inform						