## PARENT PERMISSION AND RELEASE OF LIABILITY

Minor's Name:	Date of Birth:	
Address:		
City:	State:	Zip:
Home Phone: ( )	Work Phone: (	)
Parental Consent:		
(I) (We), the undersigned, parent(s) of		, a minor, do hereby
consent to said Minor participating in		(explain activity)
conducted by:		
Parent:	Date:	
Parent:	Date:	
*	* *	
Release of Liability:		
	mnify hold free and	harmless, assume liability
for, and defend <b>Da Vinci Tattoo</b> , its agents, se		
any and all liability for personal injury or prope	rty damage and cost	s and expenses including
but not limited to, attorney's fees, reasonable i		
and all other sums for any claim or action foun		
out of		ne) use of the real or
personal property belonging to or used by Ager		
Parent:		
Parent:		
Notary Public:	Date	