

SERIOUSLY RIDICULOUS

TATTOO CONSENT & CLIENT RECORD • THE NETHERLANDS

Purpose. This form records your informed consent to receive a tattoo and the information discussed with you before the procedure. Please read it carefully and ask your tattoo artist if anything is unclear.

1. CLIENT DETAILS

Full name	_____		
Date of birth	_____	Phone	_____
Email	_____		
Address	_____		
Emergency contact (optional)	_____		

2. TATTOO / APPOINTMENT

Date	_____	Artist	_____
Tattoo / design description	_____		
Placement	_____		
Approx. size / colour	_____		
Price / quote	_____	Deposit	_____

3. HEALTH & SAFETY SCREENING

Please answer honestly. Your answers help your artist decide whether it is safe and appropriate to tattoo you today. If you are unsure about any answer, discuss it with your artist before the procedure.

- ☐ I am feeling well enough to be tattooed today and have not consumed alcohol or recreational drugs before this appointment.
- ☐ I have not taken medication or another substance that may significantly affect my alertness, judgement or ability to consent today.
- ☐ I have no known allergy or previous adverse reaction to tattoo ink, pigments, adhesives, gloves, disinfectants or aftercare products that I have not already disclosed.
- ☐ I have disclosed any relevant medical conditions, skin conditions, allergies, medications or treatments that could affect tattooing or healing.
- ☐ I do not currently have an infection, open wound, unexplained rash, significant swelling or other active skin problem at the tattoo site.
- ☐ I understand that tattooing is not risk-free and may involve pain, bleeding, swelling, infection, allergic or other skin reactions, scarring, colour changes and healing complications.
- ☐ I understand that existing moles, suspicious skin lesions, scars or other altered skin may require medical assessment before tattooing.
- ☐ I understand that individual healing varies and that the final appearance can differ from the fresh tattoo; touch-ups may sometimes be needed.

Relevant allergies / medical information / medications / skin concerns:

4. INFORMED CONSENT

- ☐ I have had the opportunity to discuss the tattoo, placement, process, foreseeable risks and aftercare with my tattoo artist.
- ☐ I understand that a tattoo permanently changes my skin and that removal can be difficult, expensive, incomplete and may cause scarring or pigment changes.
- ☐ I have reviewed and approved the design and placement before the tattoo is applied. I understand that small adjustments may be made for practical tattooing reasons and will be discussed where appropriate.
- ☐ I understand that I can ask questions and that I may withdraw my consent before the tattoo is performed.
- ☐ I understand that my artist may refuse, postpone or stop the procedure if they believe it is unsafe, if my consent is unclear, or if circumstances change.
- ☐ I have received written aftercare information and understand that following it is important for healing.
- ☐ I consent to Seriously Ridiculous / my tattoo artist performing the tattoo described on this form.

5. PHOTOGRAPHS & PORTFOLIO (SEPARATE OPTIONAL CONSENT)

Client photographs may be used for portfolio, website and social media purposes only if you separately consent below. Declining this does not affect your tattoo appointment.

- I consent to photographs of my tattoo being taken and used by Seriously Ridiculous for portfolio / website / social media purposes.
- I do NOT consent to portfolio / website / social media use.

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CLIENT COPY • TATTOO CONSENT & RECORD

6. DATA PROTECTION / CLIENT RECORD

The information on this form is collected for tattoo safety, informed consent, client administration and record-keeping. Health-related information is sensitive personal data, so Seriously Ridiculous should only collect what is necessary, keep it secure, restrict access to authorised people, and retain it only for an appropriate period. Provide the client with your separate privacy notice explaining the applicable GDPR legal basis, retention period, rights, and how to contact the business regarding their data.

☐ I have been given / shown the Seriously Ridiculous privacy notice.

7. INK / PRODUCT RECORD

Ink brand / manufacturer	_____
Colour(s) / product(s)	_____
Batch / lot number(s)	_____
Aftercare product	_____

Keep the ink/product information with the client record. RIVM advises clients to retain ink information because complications can sometimes appear long after tattooing.

8. SIGNATURES

By signing, I confirm that I have read and understood this form, have answered the health questions honestly, have had the opportunity to ask questions, and freely consent to the tattoo described above.

Client signature	_____	Date	_____
Artist signature	_____	Date	_____
Client received copy	☒ Yes	Copy provided on	_____

9. FOR CLIENT USE — AFTERCARE CONFIRMATION

☒ I have received written aftercare instructions and know who to contact if I have questions about healing.

☒ I understand that unusual or worsening symptoms should be assessed promptly by an appropriate healthcare professional.

IMPORTANT: This is a practical client-consent template, not a substitute for legal advice or the current RIVM/GGD requirements. Before using it operationally, compare it with the current RIVM tattoo consent form, your GGD licence/inspection requirements, and your privacy notice. Keep the official mandatory client information and aftercare instructions alongside this form.

Regulatory basis checked for this template: RIVM/LCHV guidance on tattooing, NEN-EN 17169 as the designated safety code, Dutch age requirements, informed consent, client copy, ink information, risk information, aftercare and GDPR considerations.