

**Doc Holliday Tattoo & Piercing
4777 South State Street
Murray, Utah 84107
(801) 268-6789**

**Medically Trained, Hospital Type Sterilization
WITH YOUR HEALTH IN MIND SINCE 1979**

This is a legal document for the release of claims of parents or legal guardians for the tattooing of a minor. I, _____

Print Parent or Guardians Name

do swear that I have legal custody of _____

Print Minor Childs Name

and have proven identification beyond a reasonable doubt for myself and my child to a notary public for the purpose of allowing the tattooing of said child.

I, _____

Print Parent or Guardians Name

agree to release and forever discharge and hold harmless Algin Enterprises L.L.C. Db. Doc Holliday Tattoo & Piercing, its agents and employees from any and all claims, damages, or legal actions arising from or connected in anyway with the piercing or the procedures and conduct used to create the tattoo.

Signature of Parent

Date

NOTICE TO PARENTS - You will also be required to sign the standard release form and approve the tattoo to be performed.

NOTICE TO NOTARY – Please see identification of parent or legal guardian as this will be filed as a legal document to protect Algin Enterprises, L.L.C. Db. Doc Holliday Tattoo & Piercing from any and all future claims.

Signature of Notary

Date

Rubber Stamp or Embossed Seal

This form expires ten days after signing.