

[Tattoo Studio Name] Virtual Consultation Form

1. Client Information

2. Live Stream Info

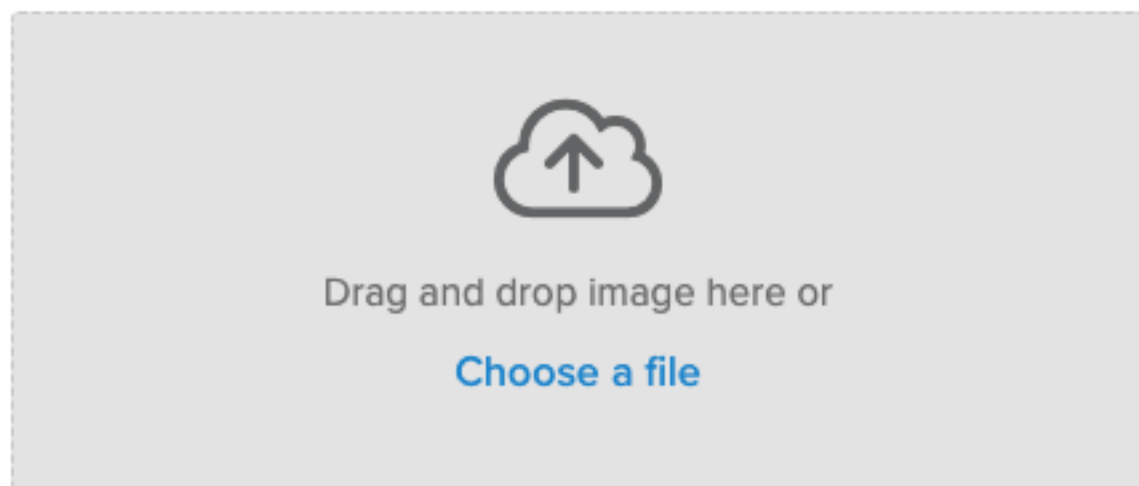
Download Instructions:

Step-by-step instructions for joining:

3. Design Preferences

Tattoo design or concept:

Reference images (attach images or provide links)



Reference links

Desired tattoo size & placement

Black & grey or color preferences

Style preference

Elements or symbols to include

Text or lettering

4. Health & Safety Information

Any existing medical conditions

Allergies (especially relevant for tattoo ink or aftercare products)


Medications being taken (especially blood thinners or immunosuppressants)

History of skin conditions or reactions to tattoos:

5. Availability & Scheduling

Preferred dates and times for the consultation: (provide multiple options if possible)

Consultation Option 1 

Consultation Option 2 

Consultation Option 3 

6. Additional Comments or Questions

Any additional information, questions, or concerns:

7. Consent & Acknowledgment

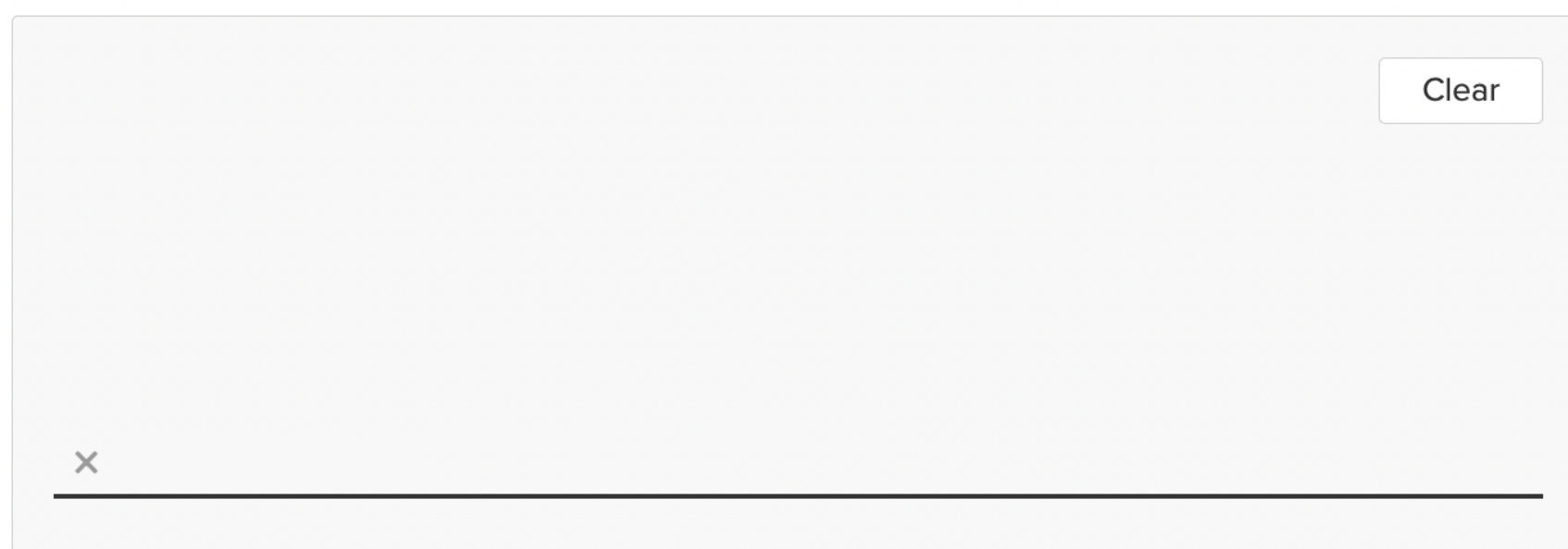
- Confirmation of agreement to participate in a virtual consultation
- Acknowledgment of the risks associated with virtual consultations, including potential technical issues or limitations

8. Signature & Date

Digital signature confirmation of agreement to the terms & conditions outlined:

I agree to all of the above. *

- I agree to use [electronic records and signatures](#).



Date of submission 