



Consent form & treatment record – Piercing

Spicy Tattoo Hamburg · Federico Agüero Bulacio (sole proprietorship) · Rahlstedter Bahnhofstraße 41, 22143 Hamburg · +49 176 87546966 · infospicytattoo@gmail.com

No.
Date

1 · Client details

First and last name Date of birth
Street, no. Postcode, city
Phone Email

☐ Official photo ID checked by the studio (age + identity) Type: ☐ ID card ☐ Passport ☐ Residence permit checked by

Data minimisation: no copy of the ID and no ID number is stored.

2 · Health questions

* Are you currently under the influence of alcohol, drugs or impairing medication (last 24 h)? ☐ Yes ☐ No
* Do you take blood thinners (e.g. aspirin, warfarin) or have a bleeding disorder? ☐ Yes ☐ No
Diabetes? ☐ Yes ☐ No
Heart or circulatory disease, epilepsy or tendency to faint? ☐ Yes ☐ No
Allergies (e.g. latex, nickel/metals, pigments, disinfectants, plasters, local anaesthetics)? ☐ Yes ☐ No
For oral piercings: braces, dentures or gum problems? ☐ Yes ☐ No
* Skin condition at the site (eczema, psoriasis, inflammation, mole, fresh scar, sunburn)? ☐ Yes ☐ No
Tendency to keloids or poor wound healing? ☐ Yes ☐ No
Weakened immune system (e.g. immunotherapy, chemotherapy, cortisone) or a known transmissible infectious disease? ☐ Yes ☐ No
* Pregnant or breastfeeding? ☐ Yes ☐ No
Medication / allergies / other (please specify):

* If “yes”, we do not carry out the procedure, or only after discussion or medical clearance. We do not pierce during pregnancy or breastfeeding. We refuse any procedure under the influence of alcohol or drugs.

3 · Information about risks

Even with the most careful, hygienic work a residual risk remains. I have been informed in particular about:

- Infections and inflammation
- Allergic reactions to the material, also years later
- Scarring and keloids
- Swelling, bleeding, pain, circulatory reactions
- Rejection or migration of the jewelry, snagging
- Cartilage damage (ear/nose), nerve injury
- For oral piercings: damage to teeth and gums, speech impairment
- Permanent holes/scars even after removing the jewelry

4 · Consent

- ☐ I am of legal age (or the guardian declaration in section 5 is completed) and able to understand the consequences of the procedure.
- ☐ My health information is complete and true. I will report any changes before the procedure.
- ☐ I was informed orally and in writing about the procedure, risks and aftercare, could ask questions and received the aftercare guide (flyer/PDF).
- ☐ The type and placement of the piercing and the starter jewelry (material, closure, size) were discussed with me and chosen by me (section 6).
- ☐ I understand that the starter jewelry is deliberately a little longer and should be swapped for a shorter bar once the swelling has gone down (downsize).
- ☐ I consent to the procedure described. There is no entitlement to a specific healing result; statutory claims, in particular for injury to life, body or health, remain unaffected.

Place, date

Client signature



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5 · Minors only: consent of the legal guardian(s)

Studio policy: age 16–17 all piercings we offer except intimate piercings · under 16 lobe piercings only · always with a guardian present (with ID) and this declaration.

Guardian's name Relationship to the minor

Phone ID checked (type) / by

- ☐ I am the legal guardian and was present during the information talk and the procedure. I have read sections 2–4 and consent to the procedure for my child.
- ☐ I confirm that I have sole custody or am acting in agreement with the other legal guardian.
- ☐ I take responsibility for ensuring my child follows the aftercare guide.

Guardian's signature _____

Signature of 2nd guardian (if present) _____

Data protection & photos

Controller: Spicy Tattoo Hamburg, Federico Agüero Bulacio, Rahlstedter Bahnhofstraße 41, 22143 Hamburg, infospicytattooohh@gmail.com. We process your details to carry out the service (Art. 6(1)(b) GDPR), to document the information and consent given and to trace the materials used in case of later reactions (Art. 6(1)(f) GDPR). We process your health information only with your explicit consent (Art. 9(2)(a) GDPR), which you give by signing; without it we cannot carry out the procedure safely. The records are kept on paper under lock, not passed on, and destroyed 10 years after the procedure (recommendation of the Hamburg health authority). You have the right to access, rectification, erasure (unless retention reasons apply), restriction and objection, and to complain to the Hamburg Commissioner for Data Protection. Details: spicy-tattoo.de/datenschutz.html

- ☐ Photos of my tattoo/piercing may be published without my face / unrecognisably on the studio's website and social media (voluntary, can be withdrawn at any time for the future).
- ☐ ... also with my face recognisable.

Client signature (data protection/photos) _____



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Date

Piercer carrying out the piercing

First and last name (block letters) Date / time of the procedure

The person named carries out the procedure and is responsible for the information given, hygiene and this record.

6 · Piercing & jewelry (completed by the studio, agreed with the client)

Type of piercing:

☐ Lobe ☐ Helix ☐ Forward helix ☐ Conch ☐ Flat ☐ Tragus ☐ Industrial ☐ Rook ☐ Daith ☐ Nose ☐ Septum
☐ Lip ☐ Tongue ☐ Eyebrow ☐ Navel ☐ Other:

Side / position: ☐ left ☐ right ☐ centre Quantity:

Jewelry	Details		
Jewelry type	☐ Labret ☐ Barbell ☐ Curved Barbell ☐ Ring ☐ Circular ☐ Nostril ☐		
Material	☐ Implant-grade titanium ASTM F136 ☐ 14K gold ☐ 18K gold ☐ ☐ Material certificate on file		
Closure	☐ Push-Pin (threadless) ☐ Internal thread ☐ Captive ring		
Gauge / length / Ø (mm)		Top / stone	
Manufacturer / item		Batch no. (LOT)	
Jewelry sterilisation	☐ autoclave-sterilised – cycle no. on ☐ sterile-packed by manufacturer (LOT/expiry)		

Material	Manufacturer / size	Batch no. (LOT)	Use by
Piercing needle (sterile, single-use)			
Skin marker (sterile, single-use)			
Skin/mucosa disinfectant			
Autoclave cycle instruments (no. / date)			

Recommended downsize date Check-up

☐ Aftercare guide handed over ☐ Jewelry and placement confirmed with client (mirror)

Piercer's signature

Client: placement and jewelry as agreed