



TANNING IMAGE

375, Route 17 South

Hackensack, NJ

Phone: 201-487-7111

www.tanningimage.com

I, _____, the parent/legal guardian of _____
(please print) (please print)

hereby give my consent to allow _____ to tan at Tanning Image.
(please print)

I further understand that without this consent form he/she will not be permitted by law to tan at this location.

Client # _____ **Date** _____

Client Name _____

Parent/Legal Guardian _____

Signature of Parent/Legal Guardian _____