TRAINING PROGRAM MODEL RELEASE

I _____, understand fully that the service I am receiving is being performed by a J Salon assistant, in an educational workshop setting. I also understand that the assistant performing my service is learning and developing techniques and will be gaining hands-on practice on my hair. Furthermore, I agree to allow J Salon and its employees to cut and or color my hair as they see fit. I hereby willingly release J Salon and its employees from any liability resulting from any hair services received as part of the J Salon Training Program.

_____

Signature Date

_____

Barber/Assistant's name

Phil's Barber Shop
210 Ward Avenue
Honolulu, HI 96814

ARE YOU INTERESTED IN BEING A "HOUSE MODEL"?

Let us know what services you may be interested in, and we'll contact you to schedule an appointment. We train throughout the year, so we are always on the lookout for reliable models.

First Name _____

Last Name _____

Phone Cell _____

Home _____

Work _____

Email _____

Interested in:

- ☐ Haircut (free)
- ☐ Shave (free)