

Date:

Name:

Phone & Email:

Birthdate:

Haylo Healing Arts Lounge

Please fill out this detailed questionnaire in *front and back* so that we may best serve you. Circle all that may apply and write down any details you want to bring to our attention. If you have any reference pictures or images, please attach them to this form. Please return Form in person or in pdf format with all images in the same email. Thank you!

Artist: Hayley (Tues. – Sat. 12-6) Linzi (Tues. – Sat. 10:30-5:30) Dani (Mon. – Fri. 10-4) Cat (Tues. – Sat. 11-6)

Day Preference: _____

Please provide a brief **description** of what this tattoo is all **about** and any **subject matter** you have in mind: _____

Approximate **size** in inches (if applicable): _____

Placement (all that apply):

- Back Upper
- Arm Lower
- Full Back Leg Inner
- Sleeve Chest Outer
- Stomach Left
- Side Right
- Hand
- Foot
- Shoulder

- Color Scheme:**
- Natural Colors
 - Bright Colors
 - Black & Grey
 - Monochromatic

- Vibe:**
- Bold
 - Delicate
 - Serious
 - Fun
 - Abstract

Style (Ex. American Traditional, Dot Work, Realism): _____



Any current tattoos or scar tissue in this area? Yes No

Please provide photo and brief description of existing tattoos in this area _____

Is this a Cover-Up/Rework? Yes No

What kind of cover-up is it? Tattoo Cover-Up
 Scar Cover-Up
 Rework

Any more details you want to share?