

WALK-IN SIGN-IN

Date _____

First name, your artist (or "any"), and what you came in for.

#	FIRST NAME	TIME IN	ARTIST	HERE FOR	ID	WAIVER
1				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
2				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
3				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
4				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
5				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
6				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
7				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
8				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
9				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
10				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
11				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
12				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
13				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
14				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
15				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
16				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
17				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
18				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
19				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
20				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
21				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐
22				☐ Flash ☐ Piercing ☐ Touch-up ☐ Consult	☐	☐