

FACIALS		WAXING	
European Facial (75 min)	\$20.00	Eyebrows	\$5.00
Aromatherapy Facial (75 min)	\$25.00	Upper Lip	\$5.00
Acne Treatment Facial (75 min)	\$25.00	Chin	\$5.00
Back Facial (45 min)	\$25.00	Sideburns	\$5.00
		Underarms	\$15.00
ADVANCED TREATMENTS		TINTING	
Microdermabrasion Facial	\$25.00	Eyelash Tint (30 min)	\$10.00
Microdermabrasion Hand Treatment	\$15.00	Brow Tint (15 min)	\$10.00
Hydradermabrasion Facial	\$25.00		
Hydradermabrasion Hand Treatment	\$15.00	ADD ONS	
Chemical Peel (Face)	\$25.00	Hand/Arm Massage	\$5.00
Chemical Peel (Hands)	\$15.00	Upper Chest Mask	\$5.00
		Upper Chest Exfoliation	\$5.00
		Paraffin Hand Treatment	\$5.00
		Peel off Mask	\$5.00
Gift Card		Ampoule	\$5.00
Retail			

Credit
Total:

Esthetics Services only for 18 years and up. No Children allowed in the SPA!
Client Services may vary between South and North Campus.

I _____, acknowledge and agree that the San Jacinto Community College District ("College") Cosmetology program ("Program") is providing cosmetology and salon services ("Services") to me as identified on this Fee Statement as a learning experience for College students enrolled in the Program. In exchange for the College's provision of Services to me for the fees stated above, I hereby RELEASE, INDEMNIFY, AND HOLD HARMLESS, THE COLLEGE, ITS TRUSTEES, EMPLOYEES, AND AGENTS (COLLECTIVELY "INDEMNITEES") FROM AND AGAINST ANY AND ALL LOSSES, LIABILITIES, DAMAGES, CLAIMS, DEMANDS, AND CAUSES OF ACTION, INCLUDING COSTS AND ATTORNEYS' FEES, REGARDLESS OF NATURE OR CHARACTER OF OR CAUSE OF ANY LOSS, LIABILITY, DAMAGES, OR CLAIMS (COLLECTIVELY, "CLAIMS") AND WAIVE ANY RIGHT TO INSTITUTE ANY ACTION IN CONNECTION WITH SUCH CLAIMS THAT HAVE OR COULD HAVE ARISEN OR MAY ARISE IN THE FUTURE IN CONNECTION WITH THE PROVISION OR RECEIPT OF SERVICES AND/OR MY PARTICIPATION IN THE PROGRAM, INCLUDING, WITHOUT LIMITATION THE FAILURE TO CONDUCT SERVICES TESTING, THE FAILURE TO PROVIDE SATISFACTORY SERVICES, OR ANY OTHER ACT OR OMISSION OF ANY INDEMNITEE. I FURTHER VOLUNTARILY AGREE TO INDEMNIFY AND DEFEND THE INDEMNITEES AGAINST ANY AND ALL CLAIMS ASSERTED BY ANY FAMILY MEMBER OR PERSON WITH SIMILAR INTERESTS OR RIGHTS THAT MAY BE BROUGHT ON ACCOUNT OF MY PARTICIPATION IN THE PROGRAM OR RECEIPT OF SERVICES.

By signing below, I acknowledge that I have read all of the terms and conditions of this Fee Statement and understand and agree to such; that I agree to the foregoing and indemnification; that my participation and acceptance of Services is voluntary and not coerced; that the fees for Services are substantially reduced due to the Program; that the records of Services provided are not confidential and that the College maintains these records in accordance with applicable law; and that but for my agreement to waive, release, and indemnify the Indemnities from and against any Claims, which is a material inducement, the College would not provide such Services.

Signature _____

Printed Name: _____

Teacher _____

Date: _____