

**Medford Board of Health
Body Art Practitioner Application**

Initial Application

Renewal Application

Tattoo

Body Piercing

(One application for each service)

Include:

- Application
- Application Fee of \$ **150.00**
- Picture ID
- Certified copy of birth certificate
- A copy of each required training certificate
(First Aid, CPR, Blood Borne Pathogen, Anatomy and/or Dermatology)
- CORI Informed Consent – Signed and completed
- SORI Informed Consent – Signed and completed

Practitioner Name: _____

Home Address: _____

Telephone Number: _____ DOB: _____

Establishment Name: _____

Address: _____

Telephone Number: _____

Operator/Owner Name: _____

Previous Establishments that Practitioner Practiced Body Art

Name	Address/City/State	Tel#
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I, _____ authorize the Medford Board of Health
(Name of Practitioner - Print)

to obtain information from previous body art establishments in which I have practiced, as well as from the city/town Boards of Health.

(Signature of Practitioner)

(Date)

I, _____ have received, read and understood the
(Name of Practitioner)

Medford Board of Health Body Art Regulations. I further agree to comply with the regulations and understand that any violation will at least, but not be limited to a fine or closure of the establishment.

(Signature of Practitioner)

(Date)