



Client Release and Informed Consent

Name: _____ Date: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: (____) _____ Email: _____

DOB: _____ Age: _____ M/F _____

REFERRED BY: _____ will receive free tan, when pkg purchased.

PLEASE ANSWER THESE QUESTIONS:

Do you always burn and never tan?.....Yes ___ No ___

Do you burn and tan?.....Yes ___ No ___

Do you rarely burn and always tan?.....Yes ___ No ___

Are you pregnant?.....Yes ___ No ___

Are you taking medications that are photosynthesizing?.....Yes ___ No ___

Have you had a rash, blisters or sun poisoning due to tanning?.....Yes ___ No ___

Is there any reason UV light or heat may be a problem for you?.....Yes ___ No ___

Has your doctor recommended tanning for you?.....Yes ___ No ___

READ THE GOVERNMENT WARNING STATEMENT AND INTITAL THE FOLLOWING

(1) Ultraviolet Radiation. (2) Follow instructions. (3) Avoid over exposure, as with natural sunlight over exposure can cause eye, skin injury and allergic reactions.

(4) FDA requires that you wear protective eyewear. Failure may result in burns or long term injury to your eyes. (5) Medications or cosmetics may increase your sensitivity to ultraviolet light. (6) If you do not tan in the natural sun, you are unlikely to tan in our tanning equipment. I will inform the salon staff of any negative effects that may incur while tanning at this salon.

State law prohibits anyone under the age of 18 from using an ultraviolet tanning device.

I have read and understand the warning statement above and the potential risks of using indoor tanning equipment. Please initial: _____

STORE POLICY

Be advised unused tanning minutes expire 2 years from date of purchase.

We will be happy to hold your accelerator for you, however any product left unused for 15 months will be tossed.

2 hours cancellation notice is required. No shows may be charged minutes. Please initial: _____

FDA regulates exposure time. The attendant and I together will determine my exposure time. I agree to monitor my own time by checking the timer. Please initial: _____

I hereby release the attendant and the owner of this salon to any damages that may occur due to exposure to UV light while in this salon.

Client Signature: _____ Date: _____

Attendant Signature: _____

Only professional products are allowed in this salon, to prevent damage to the acrylics.