

## **TANNING REGISTRATION & INITIAL VISIT**

*SKIN TYPE:	

You must complete this form before beginning your tanning sessions. If you have additional questions concerning your personal program for tanning, please feel free to consult us.

Last Name:		Fir	t Name:	
Date Of Birth:	_//	(Tanner m	ust be 18 years of age to tar	in the State of Illinois.)
Address:				
City:	ST:	Zip:	Age :	
Mobile Phone:		Otł	er Phone:	
perfumes, cosmetics and certain drugs, includ-	ing some antibiotics of	and birth control pills. device does not provid	Ultraviolet radiation from sun lamps wi	ature aging and possible photosensitive reactions when using Il aggravate the effect of the sun. Therefore do not sunbathe The effect of the sun. You may not tan while pregnant. Please

Please answer the following questions so we will be able to establish the best tanning program for you.			No
1	Do you freckle?		
2	Have you ever had a negative reaction to light? Explain:		
3	Are you currently under a doctor's care or taking any medication that would cause sensitivity to sunlight?		
4	If female, are you pregnant?		
5	Do you normally tan in natural sunlight?		
6	Does this describe your skin condition: Do you usually burn and never tan?		
7	Does this describe your skin condition: Do you burn most of the time and occasionally tan?		
8	Does this describe your skin condition: Do you achieve a tan most of the time and seldom burn?		
9	Does this describe your skin condition: Do you always tan and never burn?		
10	If you have tanned in the past, do you tan easily?		
11	Are you under medical care for your skin?		
12	Do you have dry skin?		
13	Do you wear contacts?		

## \*DETERMINATION OF SKIN TYPE

(Place the number in the 'total' column that corresponds with your response to the question below):

Determination based on your heredity disposition, own experiences with sunbathing (to unexposed skin), and habits.

Question	0	1	2	3	4	Total
What is the color of your eyes?	Lt blue, gray, or green	Blue, gray or green	Blue	Dark brown	Brownish black	
What is the color of your hair (naturally)?	Sandy red	Bland	Chestnut or dark blond	Dark brown	Black	
What is the color of your unradiated skin?	Reddish	Very pale	Pale with beige tint	Light brown	Dark brown	
Are there freckles on your unradiated skin?	Many	Several	Few	Incidental	None	
What happens when you stay long in the sun?	Painful redness, peeling, blistering	Burns regularly with peeling	Burns sometimes with peeling	Burns rarely	Never burns	
To what degree do you turn brown?	Hardly or not at all brown	Tans little, a light color	Tans reasonably	Tans very quickly	Quickly turns dark brown	
Do you turn gray brown directly after or within several hours of sunbathing?	Never	Hardly	Sometimes	Often	Always	
How does your face react to the sun?	Very sensitive	Sensitive	Normal	Very resistant	Never a problem	
When sunbathing, do you try to tan your whole body?	Never	Hardly ever	Sometimes	Often	Always	
When did you last sunbathe (even under a sun lamp)?	More than 3 months ago	2-3 months ago	1-2 months ago	Less than a month ago	Less than 10 days ago	
					Total points	

TOTAL SCORE	SKIN SENSITIVITY	SKIN BEHAVIOR ESTABLISHED
0-7	Very Sensitive	I
8-16	Sensitive	II
17-25	Normal	III
>25	Very Resistant	IV

## DANGER – ULTRAVIOLET RADIATION -- FOLLOW INSTRUCTIONS!

Avoid too frequent or lengthy exposure: As with natural sunlight, overexposure can cause eye and skin injury and allergic reactions. Repeated overexposure may cause chronic damage characterized by premature aging of the skin, wrinkling, dryness and skin cancer.

Wear protective eyewear: Failure to use protective eyewear may result in severe burns or long-term injury to the eyes. Abnormal or increased skin sensitivity or burning may be caused by certain foods, medications (including, but not limited to tranquilizers, diuretics, antibiotics, high blood pressure medication, birth control pills, and skin creams) cosmetics or toiletries. Consult a physician or pharmacist before using a sunlamp if you are using prescription or non-prescription medications, have a history of skin problems, or believe yourself especially sensitive to sunlight. Pregnant women and women on birth control pills who use tanning devices may develop discolored skin.

If you do not tan in the sun, you are unlikely to tan from the use of this product.

Ultraviolet radiation from sunlamps enhances the effects of the sun. Do not sunbathe before or after exposure to ultraviolet radiation Use of tanning device may not provide a protective base in regards to sun exposure.

WEAR PROTECTIVE EYEWEAR! Failure to wear protective eyewear reeyes. I have been instructed to wear eyewear each and every time I tan		vere burns o	or long-term inju	ury to the	
Please list any medications, cosmetics, toiletries, tanning accelera notifying City Video & Tanning Spa of any changes made immediated Certain medications, lotions and other products may cause your skin to be modern and products known to increase the photosensitivity of the skin. Check with you medications you are taking or if you have had a problem with indoor/outdoor to	t <b>ely and updat</b> re sensitive to U ur physician or p	e this form V Rays. Che harmacist if	. <mark>Initials</mark> ck our posted list	t of drugs	
WEAR PROTECTIVE EYEWEAR! Failure to wear protective eyewear reeyes. I have been instructed to wear eyewear each and every time I tan		vere burns o	or long-term inju	ury to the	
AVOID OVEREXPOSURE! As with natural sunlight, overexposure can be Repeated overexposure may cause photo aging of the skin, dryness, with frequently burn. We recommend you do not tan outdoors on days you wand it is the law you may only tan once in a 24 hour period. Initials	rinkling and in s	ome instan	ces skin cancer	if	
PLEASE NOTE: Recent legislation mandates your response to specific questions at each tanning session. It is your right and responsibility to answer all questions appropriately.  CONSENT  I acknowledge that I have read and understand the instructions for use and manufacturer's instructions for use that were provided to me by CITY VIDEO & TANNING SPA. I further acknowledge that I understand the above questions and have answered each question accurately and truthfully. In consideration of the services to be provided by CITY VIDEO & TANNING SPA including, but not limited to, the use of tanning equipment for myself, my heirs, executors, administrators, and assigns, hereby release and forever discharge CITY VIDEO & TANNING SPA, its officers, directors, agents, employees, representatives, and successors thereof, from any and all actions, courses of actions, claims and demands whatsoever, whether founded in fact or in law, arising from or by reason of any injury suffered by me as a result of the performance of services by CITY VIDEO & TANNING SPA, including use of tanning equipment and also including injuries from any act or failure to act on the part of CITY VIDEO & TANNING SPA, its directors, agents, employees, or representatives. I hereby assume full responsibility for any and all injuries, including the use of tanning equipment.					
I expressly agree that this release is intended to be broad and inclusive as permitted by theld invalid, it is agreed that the balance shall, notwithstanding, continue in full legal efferon this release in agreeing to perform services, and I agree that this release shall be legal and not a mere recital.	the laws of this sta ct. I understand th	te and that if a nat <b>CITY VIDE</b>	any portion of this r	PA is relying	
I have read this release and understand the contents, and I sign this release as my own statements and can receive a copy of the warning statement at my request.	free act; and I have	e read and un	derstand the warn	ing	
SIGNATURE:	Date:				
City Video & Tanning Spa Operator's Signature:	Date:				