



COVID-19 Liability Release Waiver

**\*\*Signature Required Prior to Every Scheduled Appointment\*\***

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), Cosmiix Artistry is taking extra precautions with the care of every client to include health history review and enhanced sanitation/disinfection procedures in accordance with the Arizona Department of Professional and Occupational Regulation guidance.

Symptoms of COVID-19 include:

- Fever
- Fatigue
- Dry Cough
- Difficulty Breathing
- I agree to the following:

I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above WITHIN THE LAST 14 DAYS.

I affirm that I, as well as all household members, have not been diagnosed with COVID-19 WITHIN THE PAST 30 DAYS.

I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 WITHIN THE PAST 30 DAYS.

I affirm that I, as well as all household members, have not traveled outside of the country, or to any city considered to be a "hot spot" for COVID-19 infections WITHIN THE PAST 30 DAYS.

I understand that Cosmiix Artistry and/or their cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each client.

·Cosmiix Artistry and it's employees are following these enhanced procedures to prevent the spread of COVID-19:

- Contactless checkout for those who prefer
- Additional time included between appointments to prevent client contact with each other
- Guests accompanying those scheduled for services discouraged
- Each client required to wash hands upon arrival and before leaving
- Your Artist will thoroughly clean hands and wear a face mask during all treatments
- All products and tools used during treatment will be disinfected after each client.
- All surfaces will be wiped thoroughly with hospital grade disinfectant before and after each client

according to the manufacturer's directions

By signing below, I agree to each statement above and release Cosmiix Artistry, and all their contracted employees from any and all liability for the unintentional exposure or harm due to COVID-19.

Cosmiix Artistry agrees to abide by these standards and affirms the same.

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

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