## **CLIENT WAIVER/RELEASE**

## Danger--Ultraviolet Radiation

Follow instructions. Avoid overexposure. As with natural sunlight, overexposure can cause burns, eye injury, and allergic reactions. Repeated exposure may cause premature aging of the skin and skin cancer. Wear protective eyewear.

Failure to use protective eyewear, provided the customer by this tanning facility,

may result in severe burns or long-term injury to the eyes.

Medications or cosmetics may increase your sensitivity to the ultraviolet radiation. Consult a physician before using sunlamp or tanning equipment if you are using medications or have a history of skin problems or believe yourself to be especially sensitive to sunlight. Abnormal skin sensitivity or burns may be caused by reaction of ultraviolet light to certain: 1) foods, 2) cosmetics, 3) medications, including tranquilizers, diuretics, antibiotics, high blood pressure medicines, and oral contraceptives. A person should not sunbathe before or after exposure to ultraviolet radiation from sunlamps.

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

Prior to my initial exposure, I was given the opportunity to read the warning above. It was provided to me at AFTER GLOW TANNING LLC. I fully understand, fully accept, and fully assume all risks associated with tanning. By booking my appointment at AFTER GLOW TANNING LLC DBA AFTER GLOW AND AFTER GLOW TANNING & BEAUTY BAR, I acknowledge that I have read and understand the warning statements listed hereon relating to tanning.

## Minor Consent By Parent or Legal Guardian

For anyone under the age of 18, a parent/legal guardian must also consent to your use of teeth whitening and spray tans.. As Parent/Guardian of the signed minor, I hereby grant permission for said minor to utilize services offered at this establishment. I have read and understand the warning statements and do herby agree that the signed minor will follow all aftercare instructions.

## Release and Indemnification

I have chosen to use the tanning equipment being offered by AFTER GLOW TANNING LLC and I do fully and unconditionally agree to the following: 1)I am fully aware of, I freely accept and fully assume all the risks of injury, illness, and aggravation of medical conditions that are inherent in the use of the tanning equipment. I represent to AFTER GLOW that I have consulted with my family physician or other health authority regarding my intent to use tanning equipment, and that I am physically capable of using such equipment, 2) I hereby discharge, relinquish, waive, and release AFTER GLOW and/or its officers, directors, agents, servants, volunteers, employees, leaders, other tanning participants, parent company, subsidiaries and affiliates (all of whom are hereinafter collectively referred to as Releasees) from any and all loss, damage, expense, injury, accident, delay, and/or liability of any kind or nature whatsoever in connection with my use of the tanning equipment, 3) I further indemnify, save, defend, and hold harmless AFTER GLOW and/ or its Releasees from all claims, actions and/or expenses which might arise from any use of the tanning equipment, 4) I hereby sign and deliver the Release and Indemnification to AFTER GLOW to induce AFTER GLOW to permit my use of the tanning equipment., and I hereby acknowledge that such use is at my own risk and without any representation of any kind or nature having been made by AFTER GLOW and/or it Releasees, 5) I do not suffer from any of the following: albinism, actinic prurigo, dermatomyositis, eczema, polymorphous light eruption, high blood pressure, lichen ruber planus, lung tuberculosis, lupus erythematous, melanoma, photo allergic eczema, porphyria, acne rosacea, solar urinary, varix, xeroderma pigmentosum, and/or any other condition which can be aggravated by ultraviolet light exposure, 6)I am not taking any medication that could make my skin extra sensitive to ultraviolet light. I do fully and unconditionally agree to: Always wear eye protection meeting FDA standards while tanning; Use moisturizer in each eye prior to and immediately following use of tanning equipment if I wear contacts; Never tan indoors and/or outdoors twice in a 24 hour period; report all skin changes to my family physician or other health authority for evaluation; Notify AFTER GLOW when I change my medications; Tan my nude body parts no more than 1/2 of the recommended exposure time during initial tanning visits; Read and abide by all signs posted in the tanning room I HAVE READ, FULLY UNDERSTAND, AND FULLY AGREE TO COMPLY WITH ALL OF THE ABOVE!