Pure Aesthetica

Coronavirus | COVID-19 Consent Waiver 06.2021

I _____ (client) voluntarily seek the services provided by Pure Aesthetica.

I acknowledge the contagious nature of the Coronavirus/COVID-19 and the CDC plus many other public health authorities still recommend practicing social distancing.

I further acknowledge that Pure Aesthetica has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19 and Pure Aesthetica can not guarantee that I will not become infected with the Coronavirus/Covid-19.

I understand the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, spa staff, and other spa clients and their families.

I acknowledge I am increasing my risk to exposure to the Coronavirus/COVID-19 and I would like to proceed with my service at Pure Aesthetica.

I acknowledge that I must comply with all set procedures to reduce the spread while attending my appointment at Pure Aesthetica.

I attest that:

I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities.
I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.
I am fully vaccinated with 🗌 Pfizer 🔲 Moderna 🔲 J&J 🗌 Novavax
☐ Other
hereby release and agree to hold Pure Aesthetica harmless from, and waive on behalf of

I hereby release and agree to hold Pure Aesthetica harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the spa, or that may otherwise arise in any way in connection with any services received from Pure Aesthetica. I understand that this release discharges Pure Aesthetica from any liability or claim that I, my heirs, or any personal representatives may have against the spa with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Pure Aesthetica. This liability waiver and release extends to the spa together with all owners, contractors, and employees.

Client Signature _____

Date: _____