



CLIENT RELEASE FORM

PERSONAL INFORMATION

NAME: _____ DOB: _____
ADDRESS: _____ CITY/STATE: _____ ZIP: _____
EMAIL: _____ PHONE: _____ CELL: _____

SAFETY PRECAUTIONS

It is our intention to keep you as well informed about tanning as possible. This means informing you how to operate the tanning equipment and notifying you of the risks and precautions associated with the use of our equipment. The proper procedure to follow in the tanning room will be clearly explained by a member of our staff. **Please feel free to ask any questions.**

- **Eye Protection:** I agree to use eye protection when using the tanning equipment in this facility. I understand that if eye protection is not worn, exposure to ultraviolet radiation may cause permanent eye damage.
- **Ultraviolet Radiation:** Overexposure to the ultraviolet radiation produced by the tanning equipment in this facility may cause burns. Sunburn can significantly increase the risk of skin cancer/melanoma.
- Repeated exposure to the ultraviolet radiation produced by the equipment in this facility may cause premature aging of the skin, skin thickening, and skin cancer.
- Tanning may be inadvisable during pregnancy and for persons with photosensitizing disease, melanoma, or other skin cancers.
- Different skin types respond differently to tanning. Exposure to ultraviolet radiation may cause possible activation of some viral conditions (cold sores), et.
- Abnormal skin sensitivity to ultraviolet radiation or burning may be caused by certain foods, cosmetics, or medications, including but not limited to the following:
 - Tranquilizers Antibiotics Blood Pressure Medication
 - Diuretics Contraceptives Other photosensitizing agents
- I understand that it is unadvisable and against policy to tan in more than one indoor tanning salon in one day.
- I agree that I will comply with all instructions on the use of the UV system and that I am using these services at my own risk.
- I acknowledge receipt of and agree to abide by the attached Rules and Regulations of this facility.



ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I have been advised and informed by 24 Hour Tan of the risks and concerns of the sun tanning process, including the effects of such process and the possible risks and consequences of exposure to the indoor Sun tanning equipment in their facility. Furthermore, 24 Hour Tan has made no warranty or guarantee, or other assurance covering the results of the indoor sun tanning process. I confirm that I have voluntarily and freely elected to use the 24 Hour Tan facilities for the sun tanning process and acknowledge, in advance of my use of 24 Hour Tan facilities and equipment, that (1) I understand the indoor sun tanning procedure, including the possible adverse skin reactions, side effects, or other possible complications and (2) voluntarily and freely assume all risks and consequences arising from my use of the equipment. I understand and agree that 24 Hour Tan and/or its representatives assume no liability in the event of accident, illness or injury to me whatsoever. 24 Hour Tan shall not be responsible for any of my acts or omissions or any damages relating thereto or arising therefrom.

I acknowledge that this is an UNSUPERVISED TANNING FACILITY and assume all risks associated with tanning, and tanning alone without the aid and presence of 24 Hour Tan staff on the premises. I HEREBY RELEASE, IDEMNIFY, AND HOLD HARMLESS 24-HOUR TAN, their respective owners, officers, affiliates, agents, and employees, ("Releases"). WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISEASE DISABILITY, DEATH OR LOSS OR DAMAGE to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES or otherwise, that may arise out of or in connection with my using any of the equipment or the facilities of 24 Hour Tan or any incident that occurs while on or off the premises or otherwise related to my 24 Hour Tan membership.

I expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of Minnesota, and if a portion of this release is held invalid, the balance shall remain in full force and effect. This release shall apply to my heirs, assigns, personal representatives, and any other next of kin. I understand that 24 Hour Tan is relying on this release in agreeing to grant me access to their facility and equipment.

My signature below constitutes my acknowledgment that

- (1) I have read, understand, and fully agree to the foregoing acknowledgements and assumptions of risk,
- (2) The proposed indoor sun tanning process has been satisfactorily explained to me and I have all of the information I desire and
- (3) I realize that I am giving up substantial rights by signing this form. My signature below is given freely and voluntarily without any inducement.

I hereby execute this Assumption of Risk and Release of Liability Form. This document is effective now, and shall remain in effect as long as I tan at any 24 Hour Tan location. I agree to release, indemnify, and hold harmless 24 Hour Tan, its owners, operators, franchiser, or manufacturers from and against any claim which I may have for any losses, damages, or injuries arising out of or in correction the use of their facilities.

PRINT NAME: _____ SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN: _____ SIGNATURE: _____ DATE: _____