**Spray Tanning Release Form**

**Please read, understand, and sign the following:**

Spray tanning is accomplished by application of a solution containing the active ingredient: DHA (Dihydroxyacetone). DHA is generally considered to be safe and has been FDA approved ONLY if you follow guide lines to protect mucous membranes. The FDA advises asking the following questions when considering the application of DHA products by spraying or misting:

* **Are you protected from exposure in the entire area of the eyes, in addition to the eyes themselves? (googles or stickers can be requested if needed)**
* **Are you protected from exposure on the lips and all parts of the body covered by mucous membrane? (lip balm or spa garments are available if requested)**
* **Are you protected from internal exposure caused by inhaling or ingesting the product? (ventilation used as needed, and nose filters are available upon request)**

If the answer to any of these questions is "no," you are not protected from the unapproved use of DHA. You should request measures to protect your eyes and mucous membranes and prevent inhalation.

**What to expect:** You will enter a private room where you will remove your clothing. This is up to you and your level of comfort. You should wear a snug dark swimsuit or underwear. Spa undergarments may be available upon requested. The solution will wash out of most clothing. It is always best to wear dark loose fitting cotton clothing. It is advised to wash the undergarment or clothing worn as soon as possible after your session.

**Next,** you will be sprayed. This process will take approximately ten to fifteen minutes. After spraying, your skin should be dry before putting your clothes back on and you should not bathe or sweat excessively for eight hours. (Dusting powder may be available upon request)

The solution will give you an immediate bronzing effect. The bronzing effect is a result of a temporary coloring additive in the solution that will remain on the skin until your tan develops. When you shower, the coloring will come off to reveal your sunless DHA tan beneath.

***All people, all skin, is different*.** All ingredients used in this procedure are intended for cosmetic use and generally regarded as safe. There are, however, occasions where individuals may be allergic to one or more ingredients in the spray tan solution. Please read the ingredients list if you have any known allergies. Please discuss with your technician.

**Be advised there is a small percentage of people whose skin may not react favorably to spray tanning.**

**For this reason, we do NOT advise being sprayed for the first time when your appearance is critical; (wedding/special occasion/prom) Please schedule a practice session 30 days before your event, for best results.**

• ***Common Sense Caution***– Pregnant or nursing women should consult their physician, and obtain a written release before using. Spray tanning is not normally contraindicated, when a mask or nose filters are used. But each pregnancy is different, your medical care provider may prefer a more cautious approach based on your specific needs and health concerns.

• ***Warning***– This product does not contain a sunscreen and does not protect against sunburn. Repeated exposure of unprotected skin to U.V. Light may increase the risk of skin aging, skin cancer and other harmful effects to the skin even if you do not burn.

**I have been provided with spray tan care instructions, which I have read and understand completely. To my knowledge, I have no medical condition or allergy which would preclude me from having this procedure done. I have been honest and accurate about the information that I have provided on this waiver.**

**I take sole responsibility of any reaction I may have, staining of clothing and/or personal belongings.**

**I have read and completely understand this consent form. (please advise your technician if you have any questions)**

**Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Client Name (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth:\_\_\_\_\_\_\_\_**

**If client is under the age of 18, parent/guardian signature required for services**

**Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**