INFRARED BODY WRAP RELEASE & CONSENT FORM

CLIENT INFORMATION SHEET

DATE_____

Last Name _____. First Name _____.

Address _____. City _____. Zip _____.

Primary Phone _____ Birthdate _____.

Email address_____ Female ☐ Male ☐

Have you ever used an Infrared Sauna or Body Wrap? Yes ☐ No ☐

CONTRA-INDICATIONS FOR INFRARED BODY WRAP

Cardiac Condition ☐	**Heavy Menstruation** ☐	Overactive Thyroid Gland ☐
Lupus Erythematosus ☐	**High or Low Blood Pressure** ☐	Acute Joint injury (48 hrs) ☐
Adrenal Suppression ☐	Implanted Pacemaker ☐	Kidney Malfunctions ☐
Multiple Sclerosis ☐	Pregnancy ☐	Open Wounds ☐
Metal Pins or Rods ☐	Constricted Coronary Blood Vessels ☐	Skin Diseases ☐
Artificial Joints ☐	Diabetes Requiring Insulin ☐	Contact Allergies ☐
Silicone Implants ☐	Enclosed Infection (Dental, Joint) ☐	Fever ☐
Varicose Veins ☐	Hemophilia ☐	Severe General Infection ☐
Scar Tissue (where) ☐	Other (please describe) _____.	

Consult your doctor before receiving an Infrared BodyWrap treatment if you have received treatment for any of the above listed highlighted conditions. You cannot receive the treatment if you suffer from any of the remaining conditions described above.

If you have a history of any other medical condition or you are taking prescription drugs, you should consult your physician before using the Infrared Body Wrap. **DO NOT TAN THE SAME DAY YOU HAVE AN INFRARED BODYWRAP.**

Doctor's Name _____. Phone # _____.

Doctor's Approval: Written ☐ Verbal ☐

I have been fully informed and understand the use of Infrared BodyWrap System and accept personal responsibility for my treatments. I understand that Vital Living WellSpa and its staff are not liable for any injury to person caused in any way by the use of its services or premises. I am aware that the results achieved by this treatment may vary from person to person, and I acknowledge that no promises or guarantees have been made to me as to the results of this treatment.

Client Signature _____ Date _____

Parental Consent _____ Date _____
If under 18 years of age

****You are advised to use the restroom prior to your treatment**

Be sure to ask about the FORMOSTAR BODY MELT accelerator for Infrared BodyWraps – trial packet - $10.70 *(includes tax, ~2+ uses)*