

Consent to use the infrared sauna is conditional upon provision of accurate answers to the following questions and signing this agreement.

Name:	Date of Birth	Date of Birth	
Addres			
Phone:	Email:		
How d	id you hear about us? If referred, name	e of person:	
Please	answer the following questions:	-	
1.	Are you pregnant?	Yes () No ()	
2.	Are you taking any medications	Yes () No ()	
3.	Have you been diagnosed with any medical condition such as anhidrosi	S	
	that may limited or prevent your ability to sweat?	Yes () No ()	
4.	Do you have unstable angina?	Yes () No ()	
5.	Have you had a recent heart attack?	Yes () No ()	
6.	Do you have severe arterial disease?	Yes () No ()	
7.	Have you been diagnosed with any other medical condition?	Yes () No ()	
	If "yes", which condition?		

If you answered "yes" to any of the above questions, have you consulted with your medical provider about using a far infrared sauna? Yes () No ()

It is always important to maintain proper hydration levels during far infrared therapy. Dehydration will actually increase carbohydrate utilization and cause less fat to be burned for energy. We highly recommend drinking a minimum of 8 oz., of water prior to entering the sauna and minimum of 8 oz., of water after sauna use.

SAUNA AGREEMENT/ACKNOWLEDGEMENT

- 1. The use of drugs, medication or alcohol prior to or during the sauna session may lead to dizziness or unconsciousness. Client using any medications must consult a physician or pharmacist prior to the use of the sauna.
- 2. Please consult your physician if you are in doubt of your ability to use the far infrared for health reasons.
- 3. No one under the age of 18 is permitted in the far infrared sauna.
- 4. Discontinue the use of the sauna if you feel light-headed, dizzy or heat exhausted.
- 5. Sauna sessions should be limited to no more than 45 minutes and temperatures must stay below 150 degrees Fahrenheit.
- 6. Plastic water bottles are not permitted in the sauna.
- 7. Infrared sauna usage is contraindicated for pregnant and breast-feeding women.
- 8. Please consult your doctor if you have any medical conditions that would prevent you from using the infrared sauna.

I, the undersigned, acknowledge that I understand that Claire Metzler/Oldwick Aesthetics is not a medical practitioner, and that she is not representing herself as being able to diagnose, treat, or prescribe for any human disease, pain, or injury. I am aware that for diagnosis of health problems, recommended treatment options, and medical supervision I must consult my doctor. I understand that the educational material and suggestions provided are not to be used as a substitute for medical care.

I confirm and acknowledge that Claire Metzler/Oldwick Aesthetics cannot be held liable for any adverse consequences allegedly arising from these Radiant Health Infrared Sauna sessions, or from any information provided. I assume all risks and responsibility for myself, and release Claire Metzler/Oldwick Aesthetics from responsibility for any injury or liability that may occur as a result of any infrared sauna sessions that I choose to take.

Signature: