

Spa Waiver

RELEASE OF LIABILITY - READ BEFORE SIGNING

1. I understand and voluntarily accept the risks associated with the use of any of the location's facilities. I agree Rainforest Med Spa will not be liable for death or any injury, including, without limitation, personal, bodily or mental injury, economic loss or damage to me resulting from negligence, other acts i, anyone acting on Rainforest Med Spa's behalf, or anyone using the services of the facilities of Rainforest Med Spa, to the fullest extent permitted by law. This agreement together with Rainforest Med Spa's rules and regulations, constitute the entire agreement between you and us and cannot be amended, except in writing by both parties. Myself and/or any of my heirs, executors, representatives, or assignees hereby release Rainforest Med Spa from all claims or liabilities for death, personal injury or property loss or damages of any kind sustained while on the premises and/or from any advice or services provided by an employee, independent contractor or any representative of Rainforest Med Spa. I agree that this application and waiver is in effect for all Sessions or any other services, and will not expire unless specifically requested by either party.
2. I understand that Rainforest Med Spa is a tranquil and professional environment and that any inappropriate behavior may result in termination of my services and full payment is expected. By signing this form, I agree to the above terms and release Rainforest Med Spa and its employees from any liability.
3. The risk of injury from the activities involved is significant, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
4. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
5. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Rainforest Med Spa immediately; and,
6. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Rainforest Med Spa their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT , FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

x _____ Date: _____
SIGNATURE

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

x _____ Date Signed: _____
PARENT/GUARDIAN'S SIGNATURE