

AESTHETICS PRO

COVID-19 WAIVER

I, _____, accept the following affirmations when engaging in a treatment from Aesthetics Pro.

Symptoms of COVID-19 may include :

- Fever
- Fatigue
- Dry cough
- Difficulty breathing
- Sore throat
- Loss of smell or taste

I understand the above symptoms and affirm that I, as well as all members of my household, do not currently have nor have experienced COVID-19 symptoms within the last 14 days.

I affirm that I, as well as all members of my household, have not been diagnosed with COVID-19 within the last 14 days.

I affirm that, to my knowledge, I have not been in contact with anyone who has been diagnosed with COVID-19.

I affirm that if I traveled outside of Canada in the last month, I would be isolated in my home for 14 days upon my return.

I understand that Aesthetics Pro cannot be held liable should I experience exposure to the virus or any other contagion as a result of my providing misinformation on this form.

I understand that, because Spa Services involve maintaining prolonged and close physical contact, there may be an elevated risk of disease transmission, including COVID-19.

Clients are required to wear a mask at all times including reception areas, hallway and consultation room.

Initial

I will visit the Aesthetics Pro Website for the COVID-19 important guidelines.

Initial

To prevent the spread of contagious viruses and to help protect each other, I understand that I will have to follow the spa's strict guidelines.

Initial

I agree Aesthetics Pro reserves the right to decline service to any patron who does not follow the guidelines.

By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive the treatments from The Aesthetics Pro.

Signature : _____

Date : _____