## Office of Environmental Health Indoor Tanning Program

## ACKNOWLEDGEMENT STATEMENT (CONSUMERS 14 - 17 YEARS OF AGE)

The following consent statement must be signed by a parent or legal guardian.

## DANGER-ULTRAVIOLET RADIATION

- Follow instructions.
- ❖ Avoid overexposure. As with natural sunlight, overexposure can cause eye and skin injury and allergic reactions.
- \* Repeated exposure may cause premature aging of the skin and skin cancer. You should be regularly screened for skin cancer if you routinely tan.
- ❖ Wear FDA compliant protective eyewear.

## Failure to Use Protective Eyewear May Result In Severe Burns or Long – Term Injury to the Eyes!!

- ❖ Medications such as tranquilizers, antibiotics, diuretics, high blood pressure medicines, birth control pills, cancer medications or cosmetics may increase your sensitivity to ultraviolet radiation. Consult a physician before using sunlamps if you are using prescription or over-the-counter medication, have a history of skin problems, or believe yourself to be especially sensitive to sunlight.
- ❖ If you do not tan in the sun, you are unlikely to tan from the use of this product.

The parent or guardian shall sign the consent form <u>in the presence of</u> the operator of the tanning facility, and said consent may be revoked at any time by the parent or guardian.

I have read or had someone read to me the above information and I understand its meaning.

Date:	
Signed By:	Relationship:
Operator (Witness)	

Copy as needed. Keep on file for review by inspector.