

# Massachusetts Board of Health Approved

Name \_\_\_\_\_  
Last First  
 Phone (for lost-n-found) \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Email \_\_\_\_\_  
 (privacy guaranteed) (req'd for FREE Next Level Minutes)

Did you receive a **courteous and complete tour** sufficient to help you make educated choices regarding your tanning health and effectiveness at Smart Tan? Yes No Somewhat

How did you hear about us? Friend Yahoo Google Sidewalk Sign City Search.com

## SKIN TYPE + BED LEVEL ANALYSIS:

Untanned Skin Color	Dark 4	Olive 3	Neutral 2	Lt 1
Skin Type	Oily 3	Normal 2	Dry 1	
Natural Hair Color	Black 3	Brown 2	Blonde 1	Red 1
I usually tan but burn on occasion	Y 2	N 1		
I burn easily	Y 1	N 2		
I freckle	Y 1	N 2		

**SKIN TYPE:** add the total score from above and circle it below

**6 ~ 7 { I }      8 ~ 9 ~ 10 { II }      11 ~ 12 { III }      13 ~ 14 { IV }**

**Tip!** The FDA & Top universities, including Harvard & BU, reject "Old School mythology by prescribing moderate UV exposure (30 min/wk) for optimal health (mind & body) - studies prove benefits of responsible sunlight far outweigh risks."

**I tan for Vitamin D &:    Physical Health    Mental Health    Appearance**

**Tip!** Regardless of your skin type, tan faster-safer-healthier by choosing the highest level available when in a SMART salon with variable UVA/UVB – it's also cheaper on average!

<b>Choose level:</b> your session will be longer when using the Smart Beds because there's less Burning.	Traditional Level 1 = +0 Level 2 = -1	Smart Level 3 = +3	Smart Level 4 = +2	Smart Level 5 = +1				
I'll be reducing burning <b>today</b> by accelerating tanning with a tanning lotion?	Y 1	N 0						
Rate your <b>current</b> tan...	1	2	3	4	5	6	7	8
I'm taking medications that would cause sensitivity to sun light?	Y -5		N 0					

I certify that I'm aware of the health benefits and risks that may be associated with tanning and exercising. UV exposure may cause burns, skin cancer and/or premature aging. Certain foods, cosmetics or medications can cause heightened sensitivity/burning. If taking meds or pregnant, I will consult a doctor before tanning. Protective eyewear is required to prevent injury to the eyes. I accept all responsibility for any injury or illness resulting

Age \_\_\_\_\_ Signature (Guardian) \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE:** \_\_\_\_\_ **Total Score - 4 for minors**

<b>Score</b>	<b>10</b>	<b>11</b>	<b>12-13</b>	<b>14</b>	<b>15-16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20+</b>
<b>Time</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>

**X** \_\_\_\_\_ **I understand the recommendation**

staff: \_\_\_\_\_