



## CUSTOMER INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ or \_\_\_\_\_

Email \_\_\_\_\_

Would you like to receive our newsletter and other information?  Yes  No  
(We do not distribute or sell any of our customer information and you may unsubscribe at any time)

Birthday: \_\_\_\_\_

### What brings you to West Valley Wellness Center today?

- Adult Salt Therapy       Children Salt Therapy  
 \_\_\_\_\_       \_\_\_\_\_

### Do any of the below conditions apply to you or your child:

- Allergies       Dermatitis       Rhinitis  
 Asthma       Ear Infection       Psoriasis  
 Bronchitis       Increase Endurance       Sinusitis  
 Cold & Flu       Eczema       Sleep Apnea/Snoring  
 Cystic Fibrosis       Emphysema       Smokers Cough  
 COPD       Hay Fever       Stress  
 General Wellness       Athletic Performance       Detox  
 Other \_\_\_\_\_

### How did you hear about us? (Please include the source)

- Internet \_\_\_\_\_  Friend/Family \_\_\_\_\_  
 Newspaper \_\_\_\_\_  Radio \_\_\_\_\_  
 Article \_\_\_\_\_  Walk-in  
 Television \_\_\_\_\_  Other \_\_\_\_\_

**DISCLAIMER**

**West Valley Wellness Center** reserves the right to alter or modify the below terms and conditions from time to time. Your acknowledgment below constitutes your agreement to any and all terms changed, modified or altered. It is in your best interest to view our website periodically for the latest terms and conditions.

The information contained both herein and on our website is designed to disseminate general information. It is not intended to give medical or pharmacological advice and as such should not be relied upon as a substitute for professional medical advice.

I understand and acknowledge that by entering the premises and employing and of the services offered by **West Valley Wellness Center**

1. I assume all known, latent or anticipated risks;
2. My participation at **WVWC** is purely voluntarily and no warranties or representations were made to me by its management to induce me to participate;
3. I shall assume full responsibility for myself and any of my guests and/or invitees;
4. I understand that **WVWC** does not evaluate or diagnose my health and I have received medical clearance prior to engaging in **Salt Therapy** activities;
5. **I have been advised of the following possible side effects:** Dry or itchy throat, nasal drip, and increased coughing at the beginning. This is a natural part of the cleaning process of the respiratory system, during which the pollution, accumulated through a long time, and now loosened up by the salt, are expelled from even the deepest regions of the lungs. Such side effects should cease with the removal of pollution and pathogens. Skin irritation and dermal sensitivity may occur. In such a case, decrease the frequency of sessions.
6. **WVWC** has neither applied for or received approval by the Food and Drug Administration or any other consumer protection group;
7. The use of the rooms at **WVWC** has not been evaluated by the Food and Drug Administration or any other agency;
8. The use of **Salt Room** is not intended to treat, cure or prevent any illness or condition. All medical conditions should be treated by a physician competent in treating that particular condition. **WVWC** assumes no responsibility for customers choosing to treat themselves;
9. All products and services provided by **WVWC** including written information, labels, brochures and flyers as well as information provided orally or in any other medium of communication, hand not been evaluated by the Food and Drug Administration and are not intended to diagnose, treat, cure or prevent any disease. For all your health concerns, please consult an appropriately licensed healthcare practitioner.

**Halotherapy is not recommended in the following cases:**

<ul style="list-style-type: none"><li>• Fever</li><li>• Tuberculosis</li><li>• Existence of cancer</li></ul>	<ul style="list-style-type: none"><li>• Acute state of respiratory attack</li><li>• Advanced pregnancy</li></ul>	<ul style="list-style-type: none"><li>• Severe heart disorders</li><li>• Contagious conditions</li></ul>
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The use of **Salt Therapy** is not intended to substitute for medical care or treatment. Do not stop your medication without first consulting with your doctor. The halotherapy does NOT substitute for any conventional medication. The information contained herein is not intended to cover all possible uses, directions, precautions, warning, drug interactions, allergic reactions, or adverse effects. If you have any questions about Halotherapy check with your doctor before proceeding.

LIMITATION OF LIABILITY. YOU AGREE THAT NEITHER SALT THERAPY NOR ANY PERSON ASSOCIATED WITH SALT THERAPY SHALL BE LIABLE FOR ANY DAMAGE RESULTING FROM YOUR USE OF **SALT ROOM AT WEST VALLEY WELLNESS CENTER (HALOTHERPY)**. THIS LIMIT OF LIABILITY COVERS CLAIMS BASED ON WARRANTY, CONTRACT, TORT, STRICT LIABILITY, AND ANY OTHER LEAGAL THEORY. THIS PROTECTION COVERS **WEST VALLEY WELLNESS CENTER**, ITS MEMBERS, EMPLYEES, AGENTS, AND SUPPLIERS. THIS PROTECTION COVERS ALL LOSSED INCLUDING, WITHOUT LIMITATION, DIRECT OR INDIRECT, SPECIAL, INCIDENTAL,, CONSEQUENTIAL, EXEMPLARY, AND PUNITIVE DAMAGES, PERSONAL INJURY/WRONGFUL DEATH, LOST PROFITS, OR DAMAGES RESULTING FROM USE OF THE SALT SUITE AND ITS FACILITIES.

Date\_\_\_\_\_ Signature\_\_\_\_\_ Print Name\_\_\_\_\_