



Floatation Intake Form

Name

Date of birth

- Yes No Have you used a float pod before?
 Yes No Are you able to safely get yourself in and out of the float pod?

Our staff are not trained in assisted transfers. If you need assistance you must bring your own helper(s). Please note that water saturated with Epsom salts at the concentrations we use will cause your skin to become extremely slippery. This may make it difficult to retrieve mobility-limited individuals from the pod, even with multiple helpers.

Yes No If I need helper(s), I and my helper(s) accept full responsibility for transfers in and out of the float tank.

Contraindications

- Yes No Do you have epilepsy?
 Yes No Do you have kidney disease?
 Yes No Do you have diabetes that is not under medical control?
 Yes No Do you have low blood pressure?
 Yes No Have you recently had a heart attack, severe arterial disease or other cardiovascular problem?
 Yes No Do you have a history of dizziness, fainting spells, heat sensitivity, narcolepsy or seizures?
 Yes No Do you have sensitivities to sulfate or magnesium?

If you answered Yes to any of these questions it is not recommended that you use the float pod at this time. We suggest that you consult your Primary Health Care Physician to obtain a release form prior to using the float pod.

Recommendations

- Yes No Do you color or dye your hair?

Do not use the float pod if your hair coloring is still bleeding/transferring color when wet. To test, wet your hair and rub it vigorously with a white towel. If there is any color transfer, you cannot float. Permanent hair dyes that are not bleeding color are OK.

- The use of drugs, medications, or alcohol prior to or during the float session may lead to dizziness or unconsciousness and is prohibited.
- Exit the float pod if you feel nauseous, light-headed, dizzy or heat exhausted.
- Please consult your physician if you are in doubt regarding your ability to use the float pod.
- Shaving prior to floatation is discouraged, as freshly shaved areas may tingle or burn.

**Please sign float liability waiver
(On reverse side of this intake form)**



Floatation Liability Waiver

We want you to have a safe and enjoyable experience with us at Float Euphoria. We ask that you be aware and agree to the following information and policies:

It is up to each individual to take caution to prevent slipping or falling as floor surfaces may be wet. The facility is cleaned between each session and the float water is treated for health and safety as approved by the Washington State Department of Health and/or the local health department. It is not certain whether the treatment method is or is not effective. Float water quality is monitored by periodic bacteriological testing. Treatment exceeds Floatation Tank Association standards.

I, the willing customer, will NOT use the float tank if:

- I have not showered thoroughly and still have oils, lotions, creams, makeup, mascara or other products on my body.
- I have had any type of **hair color or dye treatment that transfers color when wet**, or use wax/oil in my hair/dreadlocks.
- I have used a spray tan or other chemical tanner on my skin within the past two weeks.
- I have experienced vomiting or diarrhea within the past two weeks.
- I have received chemotherapy within the past two weeks.
- I have a communicable or infectious skin condition, disorder, or disease.
- I am under the influence of alcohol or drugs.
- I have open sores or a new tattoo that has not fully healed.
- I have kidney disease or am diabetic, unless my diabetes is under medical control.
- I have a history of heart trouble, epilepsy, seizures or blackouts and have not received my doctor's permission to use the floatation tank.
- I am experiencing a heavy menstrual period. Please reschedule if there is a chance any menstrual blood could come out into the water.
- I have a condition which may be adversely affected by cutaneous absorption of magnesium.
- I am mobility limited or unable to get myself into or out of the tank without assistance.
- I may release bodily fluids, voluntarily or involuntarily, into the float tank.

I understand that any violation of these rules or any other action, voluntarily or involuntarily, that results in contamination of the float water may result in a cleaning and salt replacement fee of up to \$2,000.

Release of liability

I am choosing to use the floatation tank of my own free will. By signing this agreement, I and any of my heirs, executors, representatives or assigns hereby release Float Euphoria and its employees, independent contractors, representatives, owners, operators, landlord and any other business interests at this location, from any and all claims or liabilities for personal injury or property damages of any kind sustained while on the premises, and from any advice provided by an employee, independent contractor or any representative.

I have read, understand and agree to all of the terms & policies listed above. I certify that everything on this form is true and correct to the best of my knowledge. This signed document represents an agreement between us.

Signature: _____ Date: _____

Signature: _____ Date: _____
(parent/guardian, if client is under 18)