

Medical Liability Release

This letter has been generated to serve as documentation that _____ has decided on _____
(guest's full name) (date)

to receive a _____. This guest has been informed of any potential medical complications that may
(name of service)

result as a state of their medical condition(s) combined with the afore- mentioned service but has chosen to receive the service in light of the given information. This document releases Sego Lily Spa of any liability associated with the service.

Guest Signature: _____