



**TANNING SALON SUPPLEMENT**  
Forming part of the Professional Liability Application

\_\_\_\_\_  
Name of Applicant

**Do you follow Health Canada Guidelines for Tanning Salon Owners and Users, 2015?**  Yes  No

**Does all your UAV and UAB equipment comply with federal Radiation Emitting Devices Regulations?**  Yes  No

**Are tanning equipment manufacturers' current instructions known and adhered to by your staff?**  Yes  No

**Is all tanning equipment maintained in accordance with manufacturers' instructions?**  Yes  No

**Do all employees undergo at least annual training on the Health Canada guidelines?**  Yes  No

**Are full Health Canada warnings displayed and customers made aware of them?**  Yes  No

**Is every new customer required to sign a consent form stating that they understand and accept the potential risks?**  Yes  No

**How long do you keep your patient's information/documentation on file?** \_\_\_\_\_  
Years

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Signature of Applicant or Authorized Representative

DATE: | D | D | M | M | Y | Y |