Mississippi Tanning Customer Acknowledgment

Prepared with Signathing. Roles: Customer, Facility.

1. Facility

Facility (business name): _____

Facility address and phone: _____

License or registration number (optional): _____

Operator on duty (name): _____

2. Customer

Customer (full name, as on the ID): _____

Date of birth: _____

Address: _____

Phone: _____

Photo ID the Facility checked (type and number): _____

This form is for a customer who is 18 or older. Many states do not allow anyone under 18 to use a tanning device at all, and the rest each set their own conditions for a parent's consent. Do not use this form for a minor.

3. Warnings

- Failure to use the eye protection provided to the customer by the tanning facility may result in damage to the eyes. Closing your eyes is not enough.
- Overexposure to ultraviolet light causes burns.
- Repeated exposure may result in premature aging of the skin and skin cancer.
- Abnormal skin sensitivity or burning may be caused by reactions of ultraviolet light to certain foods, cosmetics, or medications, including tranquilizers, diuretics, antibiotics, high blood pressure medicines, or birth control pills.
- Any person taking a prescription or over-the-counter drug should consult a physician before using a tanning device.
- A person whose skin always burns easily and never tans should avoid a tanning device. If you do not tan in the sun, you are unlikely to tan from a tanning device.
- A person with a personal or family history of skin cancer should avoid a tanning device. People who tan often should have their skin checked regularly.
- Pregnancy and birth control pills can cause discolored skin with ultraviolet light. A person who is or may be pregnant should ask a health care provider first.
- Do not sunbathe before or after a session on the same day. A tan from a device does not protect you from sunburn.
- Leave at least 24 hours between sessions, longer where the rule or the Facility says so, and never stay in longer than the exposure time recommended for your skin type.
- Facials, waxing, peels and similar skin treatments can make skin more sensitive to ultraviolet light.
- Tell the Facility right away about any burn, injury or reaction, and see a physician.

4. About the Customer

Skin types. Type 1 always burns and never tans. Type 2 burns easily and tans a little. Type 3 sometimes burns and tans slowly. Type 4 rarely burns and tans well. Type 5 very rarely burns and tans deeply. Type 6 never burns.

A general form from Signathing (AllContraX LLC), provided as a convenience. Use it at your own risk. It is not legal advice, no attorney has reviewed it, and it is not a claim that it complies with any law. Rules change and vary by state and city. Check the rules that apply to you, and ask your own attorney, before you rely on it. Mississippi wording follows 15 Miss. Admin. Code Pt. 14, Subpt. 70, ch. 6, R. 6.1.13 as read on 2026-11-17.

My skin type: _____
Choices: Type 1 / Type 2 / Type 3 / Type 4 / Type 5 / Type 6

The Facility has shown the Customer a list of medications and products that can raise sensitivity to ultraviolet light. The Customer lists below anything in use now: medications, cosmetics, toiletries and recent skin treatments.

In use now (or none): _____

- [ ] I have had skin cancer, or a parent, brother, sister or child has
- [ ] I am or may be pregnant
- [ ] I have a history of skin problems, or I am especially sensitive to sunlight
- [ ] I have not used a tanning device in the last 24 hours (leave unchecked and tell the operator if you have)

5. The Facility's part

Longest exposure time for this Customer's skin type (minutes): _____

Protective eyewear (provided by the Facility, or the Customer's own): _____

The Facility has explained how to use the device, how to stop it, and the exposure schedule for the Customer's skin type, and keeps protective eyewear available that meets the federal standard for tanning devices.

6. The Customer's statements

- [ ] I am 18 or older, and the identification I showed is my own
- [ ] I have read and understood the warnings in section 3, and I was able to ask questions
- [ ] I was shown the list of medications and products that can raise sensitivity to ultraviolet light
- [ ] I agree to wear protective eyewear every time I use a tanning device
- [ ] I was told the longest exposure time for my skin type and how to use and stop the device

7. What this form is, and local rules

This is an acknowledgment of warnings. It is not a release of the Facility from responsibility. The Customer is offered a copy. Depending on the state, a statement like this is signed once, once a year, every six months, or at every visit or contract, and the Facility keeps it with its record of each visit for as long as its rule requires, which runs from one year to permanently.

Some states require more than this form: their own form, a warning in words the rule sets, the statement read aloud with a witness for a customer who cannot read, or larger type. Check the rule where the Facility is before relying on this form by itself.

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Mississippi: warning

Mississippi's rule has the consumer read a copy of this warning before the first exposure, then sign a statement that it was read and understood. It is printed as the rule gives it.

DANGER - ULTRAVIOLET RADIATION
Follow instructions.
Avoid overexposure. As with natural sunlight, overexposure can cause eye and skin injury and allergic reactions. Repeated exposure may cause premature aging of the skin and skin cancer.
Wear FDA compliant protective eyewear.
FAILURE TO USE PROTECTIVE EYEWEAR MAY RESULT IN SEVERE BURNS OR LONG-TERM INJURY TO THE EYES.
Medications or cosmetics may increase your sensitivity to the ultraviolet radiation. Consult a physician before using sunlamps, indoor tanning beds or booths if you are using medications or have a history of skin problems or believe yourself especially sensitive to sunlight.
If you do not tan in the sun, you are unlikely to tan from the use of this product.

☐ I have read and understood the Mississippi warning printed above

Signatures

Customer

Signature	Date	Printed name

Facility

Signature	Date	Printed name

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