

# Spa Oasis COVID-19 Response

To all our valued Spa Oasis customers,

We are scheduled to reopen Spa Oasis as part of the Illinois 5 step reopen plan. In addition to our strict attention to cleanliness and the well-being of our customers, we will also incorporate the following procedures to help minimize the spread of illness and disease until the pandemic has been deemed over by the CDC and the State of Illinois.

These new procedures apply to our dedicated staff and our customers, as follows:

1. Staff will at all times wear a face mask while on premise.
2. All customers are required to wear a face mask PRIOR to arriving at the spa and must continuously wear the face mask until after the customer has left the physical premise.
3. All customers are required to shower PRIOR to the massage appointment.
4. Staff will have their temperature checked 3 times during their work shift. Any temperature over 99.0 degrees will be sent home and submitted to a 14 day quarantine.
5. All customers will read and sign a consent form that details all travel within the last 2 weeks. Customers who have been tested positive or had been in contact with anyone will be denied service for a minimum of 14 days.
6. All customers will submit to a temperature check upon arrival. Any temperature over 99.0 degrees will be denied service for a minimum of 14 days.
7. Staff will administer an alcohol disinfectant spray over each customer upon arrival and each staff member prior to the customer's service.
8. Staff will deep clean and disinfect all surfaces of the treatment rooms after each customer.
9. As part of our normal operations, table linens, towels, and blankets will be washed and disinfected after each room has been vacated.
10. Face massages will not be performed until further notice.

We realize these are difficult and trying times for everyone. At Spa Oasis, we also know the importance of being able to relieve and heal our customers' ailments to maintain a healthy living. To be able to provide a high level of service that our customers have grown to expect in these times, we ask for your continued cooperation during the pandemic.

We look forward to servicing you.

Stay healthy,

Your team at Spa Oasis

# Spa Oasis COVID-19 Consent Form

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First Name

Last name

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Address

City, State

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Phone Number

Email

In the past 14 days, have you traveled?

Yes No

If you answered YES, where did you travel to and did you travel by airplane?

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In the past 14 days, have you had close contact with a person who has COVID-19 or who has traveled to a high-risk region?

Yes No

In the past 14 days, has anyone in your household had flu-type symptoms?

Yes No

Do you have a fever or are you experiencing body aches or chills?

Yes No

Do you have respiratory symptoms such as a cough or shortness of breath?

Yes No

To prevent the spread of contagious viruses and to help protect each other, I understand that I will have to follow Spa Oasis's strict guidelines.

Yes No

If I feel uncomfortable proceeding with my appointment for any reason, or if my health or risk of exposure changes, I will notify Spa Oasis immediately and reschedule my appointment.

Yes No

I understand that personal contact with others, including spa services, during the COVID-19 outbreak involves a certain degree of risk that could result in illness, permanent disability or death. After carefully considering the risks involved, and in consideration of Spa Oasis and Spa Oasis's willingness to conduct my spa service, I hereby release and hold harmless Spa Oasis, its owners, officers, employees, contractors, agents and clients from any liability of any kind whatsoever, including injury or death claims, arising or allegedly arising out of my spa service appointment at Spa Oasis, including, but not limited to, claims based on allegations of negligence. I intend this release to be the broadest release allowed by law.

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Signature

Date