

**TEETH WHITENING SUPPLEMENTAL APPLICATION**

1. Does all staff wear sterilized gloves when performing services? ☐ YES ☐ NO

2. Is the product manufactured in North America? ☐ YES ☐ NO

If no, where? Health & Wellness Program - Full Spa Operations Application

Is it approved for use by Health Canada ☐ YES ☐ NO

3. Do all clients sign a hold harmless agreement or a consent form prior to offering service the first time? ☐ YES ☐ NO

4. Do you manufacture or fit any Teeth whitening appliance for client? ☐ YES ☐ NO

5. Maximum % of Carbamide Solution Used:

6. Maximum % of Hydrogen Peroxide Solution Used:

7. Please advise length solution is kept on teeth:

8. Please advise number of treatments in 1 visit:

9. Have you ever had a claim made against you? ☐ YES ☐ NO

If yes, please advise:

Name Brand of teeth whitening product used: