



Client Waiver Form

I, _____, entered the MillionHair Salon Inc. on
____/____/____ for salon or spa services without a temperature or knowingly not having Covid19. I understand that the MillionHair Salon Inc. is following re-opening guidelines set forth by the government of New York State. I have read and have been consulted about the new guidelines that the MillionHair Salon Inc. has implemented for a safe and healthy experience. Therefore, I will not hold any staff member or independent contractor of The MillionHair Salon Inc. liable for any physical or monetary damages resulting from the spread of any disease including Covid19.

Signature



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