

BEAUTY/SPA PROGRAM INJECTABLE SUPPLEMENT

Name	Years of Education	Years of Experience	Have their own E&O insurance for this service	Is this Person a Doctor	Is this Person a Nurse

Please provide a list of injectable services provided:

Do you offer PRP/Vampire Facials?	Yes	No
Has the company had claims against them in the last 5 years?	Yes	No
Has any staff (including contract staff) had claims against them in the last 5 years?	Yes	No

If yes to either of the above questions, please provide full details: