



BEAUTOX BAR

Beautox Bar LLC • 7372 Kirkwood Court N, Maple Grove, MN 55369
Beautox Bar WBL LLC • 4503 Allendale Drive, White Bear Lake, MN 55127
Phone: 763-205-6952 • Website: www.beautoxbar.com

Client Information and Consent

Client Name: _____

Welcome

Welcome to Beautox Bar LLC and/or Beautox Bar WBL LLC (together, “Beautox Bar” or the “Clinic”). We are pleased you have selected Beautox Bar to address your health and aesthetic needs. This document provides important information about our professional services and business policies. Services may be provided at either Beautox Bar LLC (Maple Grove) or Beautox Bar WBL LLC (White Bear Lake).

Registered Nurse / Nurse Practitioner

Services are provided by a licensed Registered Nurse and Nurse Practitioner in private practice. Care and services are furnished through Beautox Bar LLC and/or Beautox Bar WBL LLC, and not personally as individuals for company-provided services. Clinic care may also involve agents, professionals, medical assistants, other Registered Nurses (RNs), and/or an InMode Practitioner, as appropriate to the services you receive.

Appointments

Appointments may be scheduled by calling 763-205-6952 during business hours listed on www.beautoxbar.com, or by booking online through the website. If you need to cancel or reschedule, please provide at least twenty-four (24) hours’ notice. Cancellations or reschedules with less than 24 hours’ notice may result in a missed-appointment charge of \$100. Arriving late may also result in a \$100 charge, with no pro-rating of session time. If a Registered Nurse or Practitioner cancels your appointment, you are entitled to a refund of any prepaid fee for that session.

Number of Visits

The number of visits needed depends on many factors and will be discussed with you by the physician, Nurse Practitioner, Registered Nurse, and/or InMode Practitioner, as applicable. After an initial evaluation, a treatment plan may be recommended if you and your provider both agree it is appropriate. You should evaluate your comfort with the proposed plan. Questions are welcome at any time. If you would like help obtaining a second opinion, please ask.

Informed Consent



I give general consent for procedures as ordered by my provider. I have disclosed, or will disclose before treatment, all known allergies, medications, supplements, and relevant medical history. I understand that some procedures or claims may not have been evaluated by the U.S. Food and Drug Administration (FDA) and are not intended to diagnose, treat, cure, or prevent any disease. Aesthetic and wellness services at Beutox Bar are not a substitute for routine medical care from my primary care provider or specialists.

Except in emergencies, I have the right to be informed of the proposed procedure, alternatives, and material risks and benefits before I consent. I have received the information I desired, and I authorize and consent to the procedures advised for me. Separate procedure-specific informed consent forms may also apply to particular treatments; those forms remain in effect in addition to this general Client Information and Consent.

To the maximum extent permitted by Minnesota law, I release and hold harmless Beutox Bar LLC, Beutox Bar WBL LLC, and their respective medical directors, licensed practitioners, healthcare providers, employees, contractors, staff, and agents from claims arising from complications or damages associated with my medical or aesthetic procedures—EXCEPT that this release does not apply to claims based on gross negligence, willful or wanton misconduct, or intentional misconduct, or to claims that cannot be waived under Minnesota law (including Minn. Stat. § 604.055 regarding greater-than-ordinary negligence). Procedure-specific informed consents I sign for particular treatments are separate and also apply.

Under Minnesota law, patients are entitled to complete and current information about their diagnosis, proposed treatment, alternatives, risks, and prognosis in language they can reasonably understand, and have the right to refuse treatment after receiving that information. See Minn. Stat. § 144.651, subd. 9 (information about treatment) and subd. 12 (right to refuse care). Obtaining informed consent for tests, procedures, and treatments is also a recognized professional obligation for physicians licensed in Minnesota (see Minn. Stat. ch. 147). By signing this form, I confirm that I have received understandable information about recommended care, have had a chance to ask questions, and am consenting voluntarily.

Cancellations

Appointments cancelled or rescheduled with less than twenty-four (24) hours' notice may be charged a \$100 session fee. You are responsible for calling to cancel or reschedule.

Payment for Services

You are fully responsible for payment of all fees for services. Fees may change with thirty (30) days' prior notice. Inability or unwillingness to pay a higher fee after such notice may lead to termination of services and appropriate referrals.

If disclosure of records or testimony is compelled or requested (including for court or legal proceedings), you are responsible for the costs of producing records and for the physician's hourly rate (currently \$450 per hour) for travel, record review, waiting time, and testimony. A deposit may be required. There is no pro-rated refund of that deposit or fee once time has been reserved or services rendered for that purpose.



Information shared in the course of your care is treated as confidential, subject to the exceptions described below under Mandated Reporting and as otherwise required or permitted by law.

Mandated Reporting

Under Minnesota law, certain professionals are mandated reporters. If a provider knows or has reason to believe that a child is being abused or neglected, or has been abused or neglected within the prior three years, confidentiality may be broken as required by law, and a report may be made to the appropriate authorities.

After-Hours Emergencies

Beautox Bar does not provide 24-hour crisis or emergency services. If you have a medical emergency, call 911 or go to the nearest emergency room.

Contacting Your Medical Professional

You may leave a voicemail at 763-205-6952. Providers are not immediately available and will not take calls during client sessions. Reasonable effort will be made to return calls the same business day. Calls received after hours, on weekends, or on holidays will be returned on the next business day.

E-Mail and Text

E-mail and text messaging may be used only to arrange or modify appointments. Do not e-mail treatment content or sensitive medical information; e-mail is not secure. Please raise treatment questions at your next session. Messages sent through Facebook, the website, or similar channels are likewise not secure. By using these channels, you assume the risk of insecure transmission.

Social Media

Providers and clinic team members do not accept friend or contact requests from current or former clients on personal social media accounts, for privacy and professional-boundary reasons. Surreptitious access to a provider's personal sites may result in termination of services.

Audio and Video Recordings

Neither party may record sessions (audio or video) without mutual written agreement. The Registered Nurse and Nurse Practitioner object to any recording without prior written consent. Security cameras or other audio-video systems used for premises security are not part of medical services and are not protected by confidentiality under this agreement.

Legal

This agreement is governed by the laws of the State of Minnesota. Exclusive venue for any dispute lies in Hennepin County or Ramsey County, Minnesota. As a condition precedent to other remedies, the parties agree to attempt in



good faith to resolve disputes through arbitration administered by the American Arbitration Association (AAA) or another mutually agreed procedure. The prevailing party shall be entitled to reasonable attorneys' fees and costs.

Consent to Treatment

I voluntarily agree to assessment, care, treatment, and services. I authorize Beautox Bar LLC and/or Beautox Bar WBL LLC to provide such services. I agree to participate in planning my care. I understand that I may stop treatment at any time.

Acknowledgment and Agreement

I have read and understand this Client Information and Consent (or had it read to me). I have had an opportunity to ask questions, and my questions have been answered to my satisfaction. I agree to the policies and consents stated above. A copy of this form is available on www.beautoxbar.com, and I may request a copy for my records.

Client Name (print): _____

Client Signature: _____ **Date:** _____

Clinic Team Member Name (print): _____

Clinic Team Member Signature: _____ **Date:** _____

This consent applies to services provided by Beautox Bar LLC — 7372 Kirkwood Court N, Maple Grove, MN 55369 and Beautox Bar WBL LLC — 4503 Allendale Drive, White Bear Lake, MN 55127. Phone: 763-205-6952 • www.beautoxbar.com