

PandoraStar Light Machine Informed Consent form and Risk Assessment

The PandoraStar light machine produces white light through the use of 12 stroboscopic LEDs that flicker at different frequencies. Using computer controlled software, PandoraStar uses flickering LEDs to stimulate the brain into creating a combination of changing colours, patterns and shapes. By opening your mind and enjoying a very individual experience, PandoraStar can produce a sense of deep relaxation, leading to a feeling of well-being and contentment.

ATTENTION: PANDORASTAR IS NOT SUITABLE FOR EVERYONE

To enable us to advise whether using PandoraStar is appropriate for you, please read the following questions carefully and tick yes or no as your answer:

- Do you have any psychological or psychiatric conditions (including psychosis)? Yes [] No []
- Are you pregnant? Yes [] No []
- Have you had laser treatment to your face within the last month? Yes [] No []
- Are you taking any photosensitive medication? Yes [] No []
- Are you taking any other medication which we should know about? Yes [] No []
- Have you missed any medication today? Yes [] No []
- Any family history of epilepsy or seizures? Yes [] No []
- Have you personally suffered from epilepsy or a seizure in the past? Yes [] No []
- Have you had any brain injuries or brain surgery in the past? Yes [] No []
- Have you ever suffered a stroke? Yes [] No []
- Have you ever had a head injury? Yes [] No []
- Have you taken any recreational/psychoactive drugs in the past 24-hours? Yes [] No []

If you answered YES to any of the above questions then the PandoraStar light machine is NOT suitable for you.

PLEASE READ AND COMPLETE DETAILS BELOW IN BLOCK CAPITAL LETTERS

The nature of the PandoraStar Deep Trance Meditation Machine has been explained to me. I have read this form carefully. All of the questions set out above have been answered truthfully. I acknowledge that the PandoraStar Deep Trance Meditation Machine is NOT a medical or psychological therapy and is not intended as a treatment or remedy for any condition.

I have been asked at this time whether I have any unanswered questions about the PandoraStar light machine, and I do not. I understand the nature of the experience and what it entails. I certify that I am a competent adult of at least 18 years of age, and I sign this Informed Consent Form of my own free will.

Client signature: _____ Date: ____/____/____

Print name: _____

Date of Birth: _____

Email address: _____

Emergency contact name and number: _____

FOR OFFICIAL USE ONLY

PandoraStar operator name (print): _____

PandoraStar operator signature: _____

Date: ____/____/____