

# Soothing Arts Healing Therapies

School of Massage

Lic # 2189

12605 Emerald Coast Pkwy W. Ste 2, Miramar Beach, FL 32550 Ph: (850) 269-0820

## Student Enrollment Agreement for 546 Clock Hours Massage Therapy Program

Student Name \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_

Telephone (Day) (\_\_\_\_)\_\_\_\_-\_\_\_\_ (Night) (\_\_\_\_)\_\_\_\_-\_\_\_\_

Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Class Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Projected Graduation Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Day or Evening (*circle one*)

Day classes are from 8:30 am – 3:00 pm, four days a week (subject to change) for approximately 20 weeks.

Day classes will also have Saturday class 10:00 am – 2pm. Evening classes are from 6:00 pm – 10:00 pm, Monday through Friday for approximately 30 weeks. Both day and evening sessions are 546 clock hours.

Soothing Arts Healing Therapies School of Massage will provide, to the undersigned student, an education consisting of 546 clock hours as described in the current school catalog.

Upon successful completion of the program as stated in the catalog, the student will receive a transcript and diploma verifying completion of this program.

Student understands that although the school assists with job placement, the school does not guarantee employment.

The school may terminate this agreement as stated in the catalog due to insufficient progress, nonpayment of tuition, or failure to comply with the rules of the school.

This enrollment agreement does not pertain to any of the elective courses offered at the school.

### Cancellation and Refund Policy

#### Cancellation prior to commencement of classes:

- Cancellation should be made in person or in writing.
- All monies paid by an applicant are refunded if requested within three (3) business days after signing an enrollment contract and making an initial payment.
- Cancellation after the 3<sup>rd</sup> business day, but before the first class, will result in a full refund of all monies paid with the exception of the registration fee of \$ 150.00.
- Out-of-town students who have not visited the school can withdraw without penalty within three (3) days of visiting the facility.

#### Withdrawal after commencement of classes:

- Withdrawal is effective the day the school receives a written notice. If no written notice is given, the effective withdrawal date from the Massage Program is considered to have occurred not later than the tenth (10<sup>th</sup>) consecutive day of absence for students in the Massage Program.
- Cancellation after attendance has begun, through 40% completion of the program, will result in a Pro Rata refund computed on the number of hours completed to the total program hours.
- Cancellation after completing more than 40% of the program will result in no refund.

#### Cancellation by the School:

A student can be dismissed for insufficient progress, failure to follow rules, or nonpayment of fees. In such case, all monies paid will be refunded according to the refund policy.

**Refunds will be made within thirty (30) days of the termination date or receipt of Cancellation Notice. The Massage Program tuition (minus the registration and book/supply fee) is \$5,050 for the 546 hours. Our prorated hourly fee is calculated by multiplying the program hours by (approx.) \$9.25 per hour.**

**Additional Refund and Cancellation policies applicable to International students who are enrolled as F-1/ M-1 Visa Students. Note: All other refund and cancellation policies contained in this Enrollment Agreement also apply.**

- Students who are enrolled as F -1 / M -1 visa students will, upon request to the institution, have the application and enrollment documents translated orally into a language the student understands, and the student must verify his/her understanding by signature on this Enrollment Agreement.
- Students who are enrolled as F-1/ M-1 visa students are required to provide written notification of withdrawal to the institution as a condition for receiving any refund of tuition that is due.
- Students who are enrolled as F-1/M-1 visa students can enroll for multiple terms of study not to exceed twelve (12) months. Refund computations will apply to the current term at the time of enrollment.
- Students who are enrolled as F-1/ M-1 visa students, who has his/her visa application rejected will receive a full refund.
- Students who are enrolled as F-1 / M-1 visa students, who have been accepted by the institution cancels prior to the start of schedule classes or never attends class (no-show), will receive a full refund less the registration fee.

**TUITION AND FEES**

<b>Registration Fee</b>	<b>\$ 150</b>
<b>Books and Supplies</b>	<b>\$ 275</b>
<b>Tuition</b>	<b>\$ 5,050</b>
<b>Total Program Cost</b>	<b>\$ 5,475</b>

Students may have additional costs as follows:

- First Aid / CPR Class.....\$51.00
- HIV / Blood & Pathogens Class....\$15.00

Note: Book fee includes all required books and materials, a school shirt, and a bottle of lubricant. Students may have additional costs as follows: Students are required to provide their own bed linens. Each student must have three (3) sets of sheets and two (2) bath towels. A set of sheets consist of two twin size sheets, one fitted and one flat and a pillow case. Two queen size (flat) are acceptable, but twin size is preferred. One bottle of lubricant is sufficient for all required class work if used properly. Students may choose to purchase additional lubricant if they practice outside of class. Student may choose to buy a massage table or other items from our bookstore.

**PAYMENT OPTIONS**

1. { } Make full payment at time of signing enrollment agreement
2. { } Pay a \$ 150 registration fee at time of signing enrollment agreement and approved/applying for benefits, or will otherwise pay tuition in full. (GI Bill® / MyCAA / Other \_\_\_\_\_ )
3. { } **Day Class** – pay \$ 150 registration fee at time of signing enrollment agreement, pay \$ 275 book fee and make { } 20 weekly payments of \$ \_\_\_\_\_ each, or { } 5 monthly payments of \$ \_\_\_\_\_ each (interest free) on the remaining balance.
4. { } **Evening Class** – pay \$ 150 registration fee at time of signing enrollment agreement, pay \$ 275 book fee and make { } 30 weekly payments of \$ \_\_\_\_\_ each, or { } 7 monthly payments of \$ \_\_\_\_\_ each (interest free) on the remaining balance.

Initial tuition payment of \$ \_\_\_\_\_ was received on \_\_\_\_\_. Balance remaining is \$ \_\_\_\_\_.  
(Amount) (Date)

ANNUAL PERCENTAGE RATE  %	FINANCE CHARGE  \$	AMOUNT FINANCED The dollar amount the credit provided to you or on your behalf.  \$	TOTAL OF PAYMENT The amount you will have paid after you have made all payments as scheduled.  \$	TOTAL SALES PRICE The total cost of your purchase on credit including your down payment of  \$
YOUR PAYMENT SCHEDULE WILL BE:				
NUMBER OF PAYMENTS	AMOUNT OF EACH PAYMENT	WHEN PAYMENTS ARE DUE		
	\$	Beginning on ___/___/___ and on the same day each (check one) ___ weekly ___ bi-weekly ___ monthly thereafter.		

Weekly payments are due on Monday and become late on Thursday. Monthly payments are due by the 5<sup>th</sup> of each month. A \$ 7.00 late fee will be assessed for all late payments. Returned checks will be assessed a \$ 25.00 fee.

**NOTICE TO STUDENT: DO NOT SIGN THIS CONTRACT IF YOU HAVE NOT READ IT OR IF IT CONTAINS ANY BLANK SPACES. YOU ARE ENTITLED TO A COPY OF THIS SIGNED CONTRACT. KEEP IT TO PROTECT YOUR LEGAL RIGHTS.** This Agreement must be furnished to the student before any payment or obligation is made.

**This Enrollment Agreement becomes a legal and binding contract once completed and signed by both parties.**

I, \_\_\_\_\_, elect and agree to pay the tuition in full by making payment(s) as indicated above. I also agree that I have received a copy of and read the school catalog.

**I HAVE READ THE CANCELLATION AND REFUND POLICY LOCATED ON PAGE 1 and 2 OF THIS DOCUMENT AND I AND ALL SIGNERS OF THIS AGREEMENT HAVE RECEIVED AND READ A COPY OF THIS AGREEMENT AND READ AND RECEIVED A SCHOOL CATALOG.**

\_\_\_\_\_  
(Student Signature) (Date)

\_\_\_\_\_  
(Parent or Guardian Signature – if student is under the age of 18) (Date)

\_\_\_\_\_  
(School Official Signature) (Title) (Date)

**THIS AGREEMENT IS NOT LEGAL OR BINDING UNLESS SIGNED BY A SCHOOL OFFICIAL.**