

Soothing Arts Healing Therapies

School of Massage

Lic # 2189

3906 US Highway 98 W, Suite 31, Santa Rosa Beach, Florida 32459

Ph: (850) 608-2009

Student Enrollment Agreement for 240 Clock Hours Nail Specialist Program

Student Name _____
Last First Middle Initial

Address: _____

Telephone (Day) (____)____-____ (Night) (____)____-____

Social Security # ____-____-____ Date of Birth ____/____/____

Class Start Date ____/____/____ Projected Graduation Date ____/____/____ Day / Evening (*circle one*)

Day Classes are held 9:00 am to 2:00 pm on Monday, 9:00 am to 1:00 pm on Friday, and 6:00 pm to 10:00 pm on Tuesday or 10:00 am to 2:00 pm on Saturday (subject to change) for 19 weeks.

Evening Classes are held 6:00 pm to 11:00 pm on Wednesday, 6:00 pm to 10:00 pm on Thursday, and 6:00 pm to 10:00 pm on Tuesday or 10:00 am to 2:00 pm on Saturday (subject to change) for 19 weeks.

Soothing Arts Healing Therapies School of Massage will provide the undersigned student an education consisting of 240 clock hours as described within the current school catalog.

Upon successful completion of the program as stated in the catalog, the student will receive a 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 with the exception of the registration fee of \$150.00.
- Cancellation after the 3rd 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 with the exception of the registration fee of \$150.00.

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 Nail Specialist Program is considered to have occurred not later than the fifth (5th) consecutive day of absence for students in the Nail Specialist 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 a 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 Nail Specialist Program tuition (minus the registration & book/supply fee) is \$2,650 for the 240 hours. Due to our use of a high-end product line, the prorated hourly fee is calculated by multiplying the program hours by (approx.) \$11.04 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 have 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 scheduled classes or never attends class (no-show), will receive a full refund less the registration fee.

TUITION AND FEES

Registration Fee	\$ 150
Books	\$ 200
Product Kit	\$ 300
Tuition	<u>\$ 2,650</u>
Total Program Cost	<u>\$ 3,300</u>

PAYMENT OPTIONS

1. { } Make full payment at time of signing enrollment agreement.
2. { } Pay \$150 registration fee at time of signing enrollment agreement, pay \$200 for books, \$300 for product kit, and approved/applying for benefits or will otherwise pay tuition in full.
(GI Bill® / MyCAA / Other _____)
3. { } Pay \$ 150 registration fee at time of signing enrollment agreement, pay \$200 for books, \$300 for product kit, and make { } **10 bi-weekly** payments of \$ _____ each, or { } **5 monthly** payments of \$ _____ each (interest free) on the remaining balance.

Initial 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. \$
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) ___ bi-weekly ___ monthly thereafter.		

Payments are due according to the schedule above. Payments will be considered late on the 5th day after the due date. A \$ 15.00 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.