



# Body Wisdom Massage Therapy School

**Body Wisdom, Inc.**  
8401 Douglas Avenue #2 , Urbandale, Iowa 50322  
(515) 727-4890 \* Fax: (515) 727-5888  
Email: G.Kelley@bodywisdomschool.com

**Enrollment Agreement - Individual Course/s** (To apply please submit this completed form – also see back) *Form 1/17*

\_\_\_\_\_  
(Last Name) (Middle Initial) (First Name) (Social Security No.)

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

\_\_\_\_\_  
(Date of Birth) (Home Phone) (Work Phone) (Cell Phone)

\_\_\_\_\_  
(E-Mail) (Current Occupation)

**Emergency Contact Information:** In case of an emergency or if I neglect to inform Body Wisdom of a change of my contact information I request to contact:

.....  
(Full Name of Emergency Contact Person) (Cell Phone) (Home Phone) (Work Phone) (Relation)

**Personal Information** (use additional paper if needed)

How did you hear about the school? .....

Is your current health: \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Satisfactory \_\_\_\_\_ Poor ?

Are you physically or mentally challenged in any way? .....

You will be required to inform the school in case of pregnancy—are you currently pregnant ? .....

What is your personal and/or professional goal for enrolling in the course/s below ? .....

**REFUND POLICY AND STUDENT'S RIGHT TO CANCEL:** Applicants who wish to cancel this agreement, or make changes to one or more courses, they have enrolled for, must do so in writing to receive a refund. The first business day past the postmark of a letter, date of fax, or e-mail qualifies as the valid date of the cancellation. The School is not responsible for faxes and e-mails that don't arrive as intended. We recommend mailed correspondence and strongly advise the Applicant to call and assure that and when the School has received their cancellation notice. Please direct all inquiries to above address. If for any reason, Body Wisdom School does not accept the Applicant; all paid monies will be refunded. With cancellation at least 30 days prior to the first day of class, all monies, except for the deposit, will be refunded. With cancellation of at least 14 days prior to the first day of a class, 30% of tuitions plus costs for materials that can be used otherwise by the school. No refunds are given if with cancellation of less than 14 days prior to the beginning of class. Refunds are processed within 30 days of receipt of the written cancellation. This agreement is valid for the course/s marked on the back of this form. The Applicant agrees to pay tuitions, fees and costs upon acceptance by the school and as stated with the school's invoice. A late fee of \$35 will be charged for past due balances. A 1.5 % monthly interest, or a minimum of \$25, will be charged on balances past due amounts. An Applicant's outstanding balance may be turned over to collections after thirty days. In such case the Applicant will be charged a 25% fee on open balances, or a minimum of \$100. Applicants are responsible to inform the school of change in address and contact information. Changes in fees, costs and tuitions apply once instated.

A \$50 non-refundable deposit per course will hold your space in each given course. The balance per course is due 30 days prior to the first day of class. **Full attendance and passing of each individual class module is required to attain a certificate.**

I request enrollment for the class/es I have marked on page 2 of this document and pay the deposit/s of \$..... (please check below):

enclosed is a check/money order in the amount of: \$ ..... (please don't send cash by mail).

I pay \$ ..... in cash, while submitting this form to the School in person.

Please charge my Credit/Debit Card in the amount of \$ ..... Card Number: .....

Exp. Date: ..... CVC: ..... Cardholder: ..... Cardholder's Signature: .....

Please also charge above credit/debit card with the remainder of my balance as it becomes due.

I agree to pay the balance when it becomes due (please check one) by:  mailing a check or  stopping in to pay in person.

*My initials confirm that I agree with all details on this first page of the two-page document:.....*

**CHOICE OF COURSE/S:** Please select your course/s by entering tuitions, costs and course date/s below:

	Hours / Tuition / Costs	Tuitions	Costs	Start Date of Course (for example: "Jan '18")
Therapeutic Massage Level 1	50 hrs \$ 845 \$109.00	\$.....	\$.....	.....
Therapeutic Massage Level 2	50 hrs \$ 845 \$ 79.00	\$.....	\$.....	.....
Therapeutic Massage Level 3	50 hrs \$ 845 \$ 79.00	\$.....	\$.....	.....
Anatomy: Bones & Muscles	50 hrs \$ 845 \$ 99.00 <small>single course</small>	\$.....	\$.....	.....
Kinesiology	25 hrs \$ 424 \$ 84.00 <small>\$129 both</small>	\$.....	\$.....	.....
Physiology	50 hrs \$ 845 \$109.00	\$.....	\$.....	.....
Pathology	40 hrs \$ 674 \$109.00	\$.....	\$.....	.....
Business, Marketing & Chair Mass.	58 hrs \$ 975 \$129.00	\$.....	\$.....	.....
Ethics & Law	6 hrs \$ 99 \$ 49.00	\$.....	\$.....	.....
Wherever-You-Go: Chair Massage	8 hrs \$ 139 \$ 29.00	\$.....	\$.....	.....
Chair Massage: Add-On Module	4 hrs \$ 59 \$ 9.00	\$.....	\$.....	.....
Deep Tissue Massage	50 hrs \$ 845 \$ 89.00	\$.....	\$.....	.....
Myofascial Therapy	50 hrs \$ 845 \$ 94.00	\$.....	\$.....	.....
Neuromuscular Massage	25 hrs \$ 424 \$119.00	\$.....	\$.....	.....
Clinical Sports Massage-100	100 hrs \$1,690 \$159.00	\$.....	\$.....	.....
Assessment & Enhancement	16 hrs \$ 269 \$ 59.00	\$.....	\$.....	.....
Crazy Good Neckwork	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Ease the Load - Shoulders/Arms	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
I've Got Your Back (Spec. Techn.)	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Move Freely (Pelvis/Hips)	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Stand Your Ground (Legs/Feet)	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Fusion 16 (Spec. Mass. Techn.)	16 hrs \$ 269 \$ 59.00	\$.....	\$.....	.....
Advanced Stretching Protocols	35 hrs \$ 589 \$ 94.00	\$.....	\$.....	.....
Barefoot Bars Deep Tissue	35 hrs \$ 589 \$ 79.00	\$.....	\$.....	.....
SansHands™ - Slow Flow Massage	25 hrs \$ 424 \$ 79.00	\$.....	\$.....	.....
Positional Release Therapy	50 hrs \$ 845 \$ 99.00	\$.....	\$.....	.....
Bamboo Massage	25 hrs \$ 424 \$279.00	\$.....	\$.....	.....
Acupressure	50 hrs \$ 845 \$ 89.00	\$.....	\$.....	.....
Shiatsu (Japanese Massage)	50 hrs \$ 845 \$ 99.00	\$.....	\$.....	.....
Thai Massage on the Table	25 hrs \$ 424 \$ 79.00	\$.....	\$.....	.....
Trad. Thai Massage on the Mat	100 hrs \$1,690 \$298.00*	\$.....	\$.....	.....
7 Chakra Dhara	50 hrs \$ 845 \$119.00	\$.....	\$.....	.....
Balinese Massage	25 hrs \$ 424 \$ 79.00	\$.....	\$.....	.....
Thai Foot Massage	25 hrs \$ 424 \$ 89.00	\$.....	\$.....	.....
Hot Stone Reflexology	25 hrs \$ 424 \$269.00*	\$.....	\$.....	.....
Foot Reflexology	50 hrs \$ 845 \$ 89.00	\$.....	\$.....	.....
Relax - Ear/Hand Reflexology	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Hot & Cold Stone Therapy	50 hrs \$ 845 \$695.00*	\$.....	\$.....	.....
Hydrotherapy	25 hrs \$ 424 \$109.00	\$.....	\$.....	.....
European Spa Specialties	25 hrs \$ 424 \$109.00	\$.....	\$.....	.....
Premier Spa-Indonesia	25 hrs \$ 424 \$119.00	\$.....	\$.....	.....
Thai Steam Treatments	16 hrs \$ 269 \$ 69.00	\$.....	\$.....	.....
Ayurvedic Shirodhara	16 hrs \$ 269 \$ 69.00	\$.....	\$.....	.....
Hot Stone LomiLomi	25 hrs \$ 424 \$239.00*	\$.....	\$.....	.....
Sea Shell Massage	25 hrs \$ 424 \$179.00	\$.....	\$.....	.....
Lymphatic Drainage	50 hrs \$ 845 \$ 99.00	\$.....	\$.....	.....
Clinical Aromatherapy & Massage	50 hrs \$ 845 \$109.00	\$.....	\$.....	.....
Maternity & Infant Massage	50 hrs \$ 845 \$ 99.00	\$.....	\$.....	.....
Geriatric (Elderly) Massage	40 hrs \$ 674 \$ 89.00	\$.....	\$.....	.....
Mass. for Oncology & Hospice Care	16 hrs \$ 269 \$ 69.00	\$.....	\$.....	.....
Rebalancing	16 hrs \$ 269 \$ 49.00	\$.....	\$.....	.....
Pulsing	16 hrs \$ 269 \$ 49.00	\$.....	\$.....	.....
Sound Infused Therapies	25 hrs \$ 424 \$ 89.00	\$.....	\$.....	.....
Your Crown & Glory - Head Mass.	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Dreamy Face Sequence	8 hrs \$ 139 \$ 24.00	\$.....	\$.....	.....
Soothing Belly Work (Abdominal)	8 hrs \$ 139 (ask school)	\$.....	\$.....	.....
		\$.....	\$.....	
		\$.....	\$.....	

add and enter total of tuition & costs here: \$ .....

\* Amount can be pro-rated in case student owns materials already.

I HAVE COMPLETED THIS FORM TO THE BEST OF MY KNOWLEDGE AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. MY SIGNATURE BELOW CERTIFIES THAT I HAVE READ, UNDERSTOOD AND AGREED TO MY RIGHTS AND RESPONSIBILITIES AS STATED WITH THIS FORM. I FULLY UNDERSTAND AND AGREE TO THE SCHOOL'S CANCELLATION- REFUND AND OTHER POLICIES.

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

ACCEPTED BY:

(School Official) \_\_\_\_\_

Date \_\_\_\_\_