



Body Wisdom Massage Therapy School

Body Wisdom, Inc.
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Form 070717

Enrollment Agreement - Individual Course/s (To apply please select course/s by entering details and submit this completed form – also see back)

Course Title	Course Hours	Use & Material Fees	Select Course by Transposing Use & Material Fees	Calculate Tuition at: \$18.60 x Hours	Summarize Total Costs Course	Please Enter Start of Course (ex. 'Dec. '18)	Calculate Non-Refundable Application Fee/Course at: \$3 x Hours or max. \$45
Orthopedic (also Clinical Sports) Massage	96	\$ 219					
Traditional Thai Massage on the Mat	96	\$ 319*					
Business, Marketing & Chair Massage	56	\$ 249					
Anatomy: Bones & Muscles	52	\$ 189*					
Physiology	52	\$ 184					
Therapeutic Massage Level 1	48	\$ 154					
Therapeutic Massage Level 2	48	\$ 119					
Therapeutic Massage Level 3	48	\$ 109					
Deep Tissue Massage	48	\$ 119					
Positional Release Technique	48	\$ 129					
Hot & Cold Stone Therapy	48	\$ 694*					
Shiatsu (Japanese Massage)	48	\$ 159					
Acupressure	48	\$ 134					
Foot Reflexology	48	\$ 119					
Lymphatic Drainage Massage	48	\$ 134					
Clinical Aromatherapy & Massage	48	\$ 194					
Maternity & Infant Massage	48	\$ 134					
Pathology	44	\$ 179					
Barefoot Bars Deep Tissue	32	\$ 134					
Kinesiology	28	\$ 139*					
Neuromuscular Massage	24	\$ 129					
SansHands Flow™	24	\$ 109					
Bamboo Massage	24	\$ 374					
Clinical Hydrotherapy	24	\$ 174					
Thai Massage on the Table	24	\$ 124					
Hot Stone LomiLomi	24	\$ 294*					
European Spa Specialties	24	\$ 234					
Thai Foot Massage	24	\$ 129					
Geriatric (Elderly) Massage	24	\$ 134					
Fusion 16 – “Best of BWS” Collection	16	\$ 89					
Rock to Relax: Pulsing	16	\$ 89					
Rock to Relax: Rebalancing	16	\$ 89					
Thai Spa	16	\$ 119					
Premier Spa – Indonesia	16	\$ 89					
Sea Shell Massage	16	\$ 234*					
Ayurvedic Shirodhara	16	\$ 194					
Hot Stone Reflexology	16	\$ 264*					
Sound Infused Massage Therapies	16	\$ 119					
Oncology & Hospice Massage	16	\$ 109					
Your Crown & Glory: Head Massage	8	\$ 64					
Dreamy Face Sequence	8	\$ 64					
Crazy Good Neck Work	8	\$ 64					
Ease the Load: Shoulder Work	8	\$ 64					
Embracing Life: Arms & Hands	8	\$ 64					
Soothing Belly Work: Abdominal Sequence	8	\$ 64					
I've Got your Back: Special Back Techn.	8	\$ 64					
Move Freely: Pelvis & Hips	8	\$ 64					
Stand your Ground: Legs & Feet	8	\$ 64					
Relax: Ear & Hand Reflexology	8	\$ 64					
Wherever-You-Go - Chair Massage	8	\$ 64					
Ethics & Law	6	\$ 24					
Chair Massage – Event (Add-On)	4	\$ 19					

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

\$\$ (Total Cost of Selected Courses)
 \$\$\$\$ (Total Non-Refundable Application Fee/s Due)

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

<hr/> (Last Name)	<hr/> (Middle Initial) (First Name)	<hr/> (Social Security No.)	
<hr/> (Street Address)	<hr/> (City)	<hr/> (State)	<hr/> (Zip)
<hr/> (Date of Birth)	<hr/> (Mobile Phone)	<hr/> (Alternative Phone)	<hr/> (Work Phone)
<hr/> (E-Mail)		<hr/> (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:

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(Full Name of Emergency Contact Person)	(Cell Phone)	(Home Phone)	(Work Phone)	(Relation)
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Personal Information *(use additional paper if needed)*

How did you hear about the school?

Is your current health: _____ Excellent _____ Good _____ Satisfactory _____ Poor ? Do you use any medications: Yes / No

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 ?

Have you completed a massage certification? Yes / No If yes, how many hours?:

If no, what massage therapy training did you have so far, and where did you attain it?:

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Do you currently hold a valid License to practice Massage? Yes / No If yes, issued by which State?:

Are you currently insured to practice massage? Yes / No (We strongly advise to have valid insurance for hands-on practice in class.)

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

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Refund and Cancellation Policy: In the event a student wishes to drop an individual course, they must do so in writing. Per IA Code §714.23 Body Wisdom School will make a pro rata refund of tuition charges to a student who drops a course in an amount that is not less than ninety (90) percent of the amount of tuition charged to the student for the period of enrollment multiplied by the ratio of the number of scheduled clock hours remaining in sixty (60) percent of the course period to the total number of scheduled clock hours in sixty (60) percent of the course period. If a student, dropping a course, has completed sixty (60) percent or more of the course period, the student is not entitled to a refund of any tuition charges. However, if, at any time, a student drops an individual course due to the student's physical incapacity or due to the transfer of the student's spouse's employment to another city, the terminating student shall receive a refund of tuition charges in an amount that equals the amount of tuition charged to the student for the course period multiplied by the ratio of the remaining number of scheduled clock hours in the course period to the total number of scheduled clock hours in the course period.

Body Wisdom School will determine whether a student dropping a course is eligible for a refund of tuition charges and, if applicable, credit open balances or issue a refund accordingly within 45 days of determining that the student dropped the course. The \$3 per course hour, maximum \$45, Application Fee per course is non-refundable. A non-transferable Cancellation Fee of \$3 per course hour, maximum of \$45 per course, applies in case of dropping a course within less than 30 days prior to, or after the course start date. In case the school cancels a course, all paid moneys are refundable or transferrable.

Full attendance and passing of each course is required to attain a certificate of completion.

I request enrollment for the class/es indicated on page 1 of this document, and I am paying the non-refundable application fee/s of \$..... (see page 1):

I am a Body Wisdom Graduate and request a Graduate Discount. I graduated under the name:
(in case of name change)

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

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/s as due.

I agree to pay the balance/s as due by (please check one): mailing a check calling w/a credit card paying in person.

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.

<hr/> Student's Signature	<hr/> Date
ACCEPTED BY:	
<hr/> (School Official)	<hr/> Date