



**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 Registration 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	\$ 250					
Therapeutic Massage Level 1	52	\$ 160					
Therapeutic Massage Level 2	52	\$ 120					
Therapeutic Massage Level 3	52	\$ 120					
Anatomy 48-\$150 - Kinesiology 52-\$150* Physiology 56-\$190 – Pathology 44-\$180							
Deep Tissue Massage	48	\$ 119					
Myofascial Therapy	48	\$ 129					
Positional Release Technique	48	\$ 129					
Hot & Cold Stone Therapy	48	\$ 694*					
Acupressure	48	\$ 134					
Foot Reflexology	48	\$ 119					
Lymphatic Drainage Massage	48	\$ 134					
Clinical Aromatherapy & Massage	48	\$ 194					
Maternity & Infant Massage	48	\$ 134					
Barefoot Bars Deep Tissue	32	\$ 134					
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					
Craniosacral Therapy Level 1	24	\$ 124					
Craniosacral Therapy Level 2	24	\$ 94					
Fusion 16 – “Best of BWS” Collection	16	\$ 89					
Rock to Relax: Pulsing	16	\$ 89					
Rock to Relax: Rebalancing	16	\$ 89					
Thai Herbal Spa	16	\$ 119					
Premier Spa – Indonesia	16	\$ 119					
Sea Shell Massage	16	\$ 234*					
Ayurvedic Shirodhara	16	\$ 89					
Hot Stone Reflexology	16	\$ 264*					
Sound Infused Massage Therapies	16	\$ 119					
Oncology & Hospice Massage	16	\$ 109					
Reiki Intensive	16	\$ 89					
Reiki Master Course	16	\$ 89					
Himalayan Salt Stone Massage	8	\$ 109					
Your Crown & Glory: Head Massage	8	\$ 64					
Dreamy Face Sequence	8	\$ 64					
Crazy Good Neck Work (Version I or II)	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					
Intuitive Hands-On Energy Work	8	\$ 64					
Stretching-Thai Chi-Qigong - Lower Body	8	\$ 64					
Stretching-Thai Chi-Qigong - Upper Body	8	\$ 64					
Cupping: Myofascial Decompression	8	\$ 74					
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 Registration Fee/s Due)

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

Please print:

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

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

\_\_\_\_\_  
 (Date of Birth) (Mobile Phone) (Alternative Phone) (Work 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? 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?: .....

.....

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? .....

.....

**Terms** - Non-refundable registration fees are due with submission of the application. Tuitions and costs for individual courses are billed upon receipt of application and fee and due as indicated on such invoices, generally 14 days prior to a course start date. Full attendance is required to attain a course certificate. This includes on-time presence and full course participation. Up to 20% of missed course time may be made up with custom assignments if feasible and as determined by the school in such case. No certificates can be issued with less than 80% attendance.

**Refund Policy** – A student or CE-student, who has submitted an application for one or more individual courses, including a list of courses combined into a Certificate of Excellence or Reflexology Program, has the right to withdraw within 24 hours at no charge. With any later withdrawal of 14 or more days prior to a course start, the school will not refund the registration fee, but does not charge for tuitions and costs. In case of withdrawal of less than 14 days, but at least 24 hours prior to a course start, the school shall retain/receive 50% of tuitions in addition to the non-refundable registration fee. In case of any later withdrawal or non-attendance, the school shall retain/receive 100% of tuitions, costs, and fees. In case a full course or one or more individual course class/es is/are rescheduled due to weather conditions, which result in irresolvable scheduling conflicts for the course participant, all charges for tuitions and registration fee may be transferred to an entirely different course date or another course choice. Any course fees may or may not be transferrable or refundable, as determined by the school in such case. In case the school cancels a course, all paid monies, including the registration fee, are refundable or transferrable. The school processes refunds within 45 days of official cancellation or withdrawal.

I request enrollment for the class/es indicated on page 1 of this document, and I am paying the non-refundable registration 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.

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

\_\_\_\_\_  
Date

**ACCEPTED BY:**

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

\_\_\_\_\_  
Date