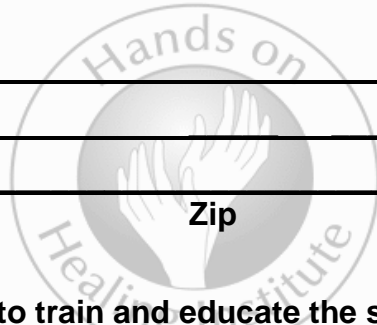


Hands on Healing Institute Enrollment Agreement

Course Name: CMT150 (150 hours Certified Massage Therapy Course)

Name: _____ Start Date: _____
Address: _____ End Date: _____
_____ DAY / EVE: _____
City _____ Zip _____



The objective of this course is to train and educate the student to become a Massage Therapist. By successfully completing this course, this educational service is represented to lead to certification of the title of Massage Therapist.

Licensing of massage therapists in California occurs at the individual city and county level, and varies somewhat from city to city and county to county. Many of our local cities still require a minimum of 100 to 150 clock hours of massage training from a state-approved learning institution, such as *Hands on Healing Institute*, in order to qualify and certify potential licensees. Tujunga, California falls into Los Angeles City and requires 300 hours for licensing. Students that wish to become licensed in Tujunga or other areas that require more than 150 hours may accumulate required hours by taking continuing education courses. Students are responsible for determining and meeting particular area requirements. All state-approved massage schools offer certification for the state of California. Certification is not to be confused with licensing. Most cities and counties in California require a valid massage certificate prior to issuing a license to practice. There is now a voluntary State Certification issued by the Massage Therapy Organization starting Sept. 2009.

Any questions or problems concerning this school which have not been satisfactorily answered or resolved by the school should be directed to the BUREAU FOR PRIVATE POSTSECONDARY AND VOCATIONAL EDUCATION, 1625 N. Market Street, S-202, Sacramento, CA 95834—1924; Mailing address: P.O. Box 980818, West Sacramento, CA 95698-0818 (916) 574-7720

BUYER'S RIGHT TO CANCEL: The student has the right to cancel the enrollment agreement for this course of instruction until **midnight of the fifth business day** after the day on which the student ATTENDED THE FIRST CLASS of the course of instruction. Cancellation shall occur when the student gives written Notice of Cancellation Form to the school at the address specified in this agreement. If the student cancels the agreement, the student shall have no liability except the return of the HHI Course Book and Intro to Massage Therapy in pristine condition. If the student fails to return the books within a (10) ten day period, he/she will accrue charges that will be deducted from the refund. The school shall refund any consideration paid by the student within (30) thirty days after the school receives notice of cancellation. The student has the right to withdraw from a course of instruction at any time. If the student withdraws from a course of instruction after midnight of the fifth business day after the day on which the student attended the first class, the school will remit a refund; as per the following refund formula. The amount of the refund has to be calculated on a pro-rata basis, less a \$75.00 non-refundable registration fee and any books supplied by the school that were not returned within (10) ten days.

The refund formula is as follows: total paid *minus* registration fee *multiplied by* hours of instruction received *minus* unreturned equipment *equals* total refund.

CANCELLATION: A Notice of Cancellation Form should be delivered to Camille Sandroni, Director Hands on Healing Institute, 6708 Foothill Boulevard. Tujunga, CA 91042 Phone (818) 951-5811

Non-California Residents, recipients of third-party pay for tuition and course costs, such as workforce investment voucher or rehabilitation funding: You are not eligible for protection under or recovery from the Student Tuition Recovery Fund.

Hands on Healing Institute, 6708 Foothill Boulevard, Tujunga, CA 91042 (818) 951-5811
website: www.gotohhi.org email: massageschool@gotohhi.org Pg. 1 Rev. 1/13/09

Hands on Healing Institute Enrollment Agreement

TOTAL FEE: \$1,760.00 Includes:

NON-REFUNDABLE: Registration Fee \$75.00 & HHI Course Manual

REFUNDABLE: Student Pack \$170.00: Student pack must be purchased as part of enrollment. Total includes: Textbook: Intro to Massage Therapy \$67.06 (if returned in pristine condition); Hold all Holster \$20.30; ½ gallon Biotone Dual Purpose Cream \$40.00; set of flannel sheets \$28.29 and HHI Bag \$10.83. These items can only be refunded if not opened or used within 10 days of School receiving written cancellation or drop date.

REFUNDABLE: Tuition Fee \$1,515.00 on a pro-rated basis – see Withdrawal/refund policy)

You are responsible for this amount. If you obtain a student loan, you are responsible for repaying the loan amount plus any interest.

Hands on Healing Institute covers cost of Student Tuition Recovery Fee. Massage tables are provided during training sessions for use in classroom only.

PAYMENT PLAN

The following is an optional interest-free payment plan should a student need to pay the tuition in installments:

	<u>PAYMENT SCHEDULE</u>	
REGISTRATION	RESERVES YOUR PLACE	\$ 75.00
1st PAYMENT	DUE TWO WEEKS PRIOR TO START DATE	\$ 525.00
2nd PAYMENT	3 rd MONDAY OF CLASS	\$ 580.00
3rd PAYMENT	6 TH MONDAY OF CLASS	\$ 580.00
TOTAL		\$ 1,760.00

\$75 Registration fee holds your space in class.

NOTICE: ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSES THAT THE DEBTOR COULD ASSERT AGAINST THE SELLER OF GOODS OR SERVICES OBTAINED PURSUANT HERETO OR WITH THE PROCEEDS HEREOF, RECOVERY HEREUNDER BY THE DEBTOR SHALL NOT EXCEED AMOUNTS PAID BY THE DEBTOR HEREUNDER. (CCR 94838)

TUITION DEFAULT

Students defaulting on scheduled tuition payments risk immediate dismissal at the discretion of the school director. A certificate of completion will be issued only after students have fulfilled their academic and financial obligations to *Hands on Healing Institute*. **Late Fees: Payment Plan - A \$25.00 late fee will be charged for Non Payment of tuition over 7 days late. The student will need to speak with the Office in order to continue attending classes for Non Payment of tuition beyond 7 days late.**

My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution’s cancellation and refund policies have been clearly explained to me. I understand that this contract is a legally binding instrument when signed by the student and accepted by the school.

Student Signature: _____

Date: _____

Registrar Signature: _____

Date: _____

PRINT NAME AS YOU WISH TO SEE IT ON YOUR CERTIFICATE:

Hands on Healing Institute, 6708 Foothill Boulevard, Tujunga, CA 91042 (818) 951-5811
website: www.gotohhi.org email: massageschool@gotohhi.org Pg. 2 Rev. 1/13/09

Hands on Healing Institute Confidential Application for Admission

Please list any major surgeries, illnesses, injuries, concussions, accidents, etc.:

Please mark each item that applies with a "P" for past condition or a "C" for current condition. If you have a condition that is not listed below, please mark "Other" and specify in the space provided.

Cardiovascular:

- Arteriosclerosis
- Heart attack
- Hypertension
- Murmurs
- Stroke
- Other: _____

Gastrointestinal:

- Constipation
- Diarrhea
- Gastritis
- Hepatitis
- Hernia
- Other: _____

Respiratory:

- Asthma
- Bronchitis
- Emphysema
- Pneumonia
- Tuberculosis
- Other: _____

Musculoskeletal:

- Arthritis
- Fascia disease
- Joint disease
- Tendonitis
- Varicose veins
- Other: _____

Head, Eyes, Nose, Throat:

- Cataracts
- Dizziness
- Impaired hearing
- Loss of consciousness
- Nosebleeds
- Other: _____

Endocrine:

- Anemia
- Cancer (Which part of the body? _____)
- Diabetes
- Epstein-Barr Syndrome
- Any communicable disease? (Specify: _____)
- Other: _____

Skin:

- Athlete's foot
- Hives
- Psoriasis
- Other: _____

Urogenital:

- Herpes
- Candidiasis
- Gonorrhea
- Kidney Stones
- Other: _____

Other: _____

I DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Signature: _____

Date: _____

SCHOOL USE ONLY:

Interviewed by: _____ Date: _____ Comments: _____

Paid In full Date _____ Registration fee \$75 Tuition Fee \$1760 * Paid: Cash CC or Ck # _____
 * Other Amount \$ _____

(not refundable)

Registration fee \$75	Date _____	Cash, CC or Ck #:	_____	Remaining Balance \$	_____
Student Pack fee \$160	Date _____	Cash, CC or Ck #:	_____	Remaining Balance \$	_____

Installments on Tuition Fee \$1525 or *Other Amount \$ _____

1st pmt \$ _____	Date _____	Cash CC or Ck #:	_____	Remaining Balance \$	_____
2nd pmt \$ _____	Date _____	Cash CC or Ck #:	_____	Remaining Balance \$	_____
3rd pmt \$ _____	Date _____	Cash CC or Ck #:	_____	Remaining Balance \$	_____