



Still Waters Massage Institute

1800 Bickford Ave Ste 202

Snohomish, WA 98290

425-308-1030

massagestillwaters@yahoo.com

Attachment A

Still Waters Massage Institute

NOTICE

Washington law requires the following information to be supplied to each student enrolling in a private vocational school licensed under RCW 28C.10. One copy of this notice bearing original signatures must be attached by the school as an addenda to that individual's enrollment agreement and a copy must be provided to the enrollee by the school.

ACKNOWLEDGMENT BY ENROLLEE

1. I understand and accept that any contract for training I enter into with Still Waters Massage Institute contains legally binding obligations and responsibilities.
2. I understand and accept that repayment obligations will be placed upon me by any loans or other financing arrangements I enter into as a means to pay for my training.
3. I understand that any enrollment contract I enter into will not be binding or take effect for at least five days, excluding Sundays and holidays, following the last date such a contract is signed by the school and myself, provided that I have not entered classes sooner.

Name (Please print) _____

Signed: _____

Dated this ____ day of _____, 20____

ACKNOWLEDGMENT BY SCHOOL

Prior to being enrolled in Still Waters Massage Institute, the applicant whose name and signature appears below has been made aware of the legal obligations he/she takes on by entering into a contract for training. Those discussions included cautions by the school about acquiring an excessive debt burden that might become difficult to repay given employment opportunities and average starting salaries in his/her chosen occupation.

Signed: _____

Title: _____

Dated this ____ day of _____, 20____

I certify that I have read and understand the cancellation and refund policy and the complaint procedure; I have received a copy of the school catalog or brochure; and I am entitled to an exact copy of this Enrollment Agreement, school catalog, and any other papers I sign.

Cancellation of Classes:

Still Waters Massage Institute reserves the right to cancel a starting class if the number of students enrolling is insufficient. Such a cancellation will be considered a rejection by the school and will entitle the student to a full refund of all money paid.

Cancellation and Refund Policy for Resident Training Programs:

1. Still Waters Massage Institute must refund all money paid if the applicant is not accepted. This includes instances where a starting class is canceled by the school.
2. Still Waters Massage Institute must refund all money paid if the applicant cancels within five business days (excluding Sundays and holidays) after the day the contract is signed or an initial payment is made, as long as the applicant has not begun training.
3. Still Waters Massage Institute may retain an established registration fee equal to ten percent of the total tuition cost, or one hundred dollars, whichever is less, if the applicant cancels after the fifth business day after signing the contract or making an initial payment. A “registration fee” is any fee charged by a school to process student applications and establish a student record system.
4. If training is terminated after the student enters classes, Still Waters Massage Institute may retain the registration fee established under (3) of this subsection, plus a percentage of the total tuition as described in the following table:

If the student completes this amount of training:	The school may keep this percentage of the tuition cost:
One week or up to 10%, whichever is less	10%
More than one week or 10% whichever is less but less than 25%	25%
25% through 50%	50%
More than 50%	100%

5. When calculating refunds, the official date of a student’s termination is the last day of recorded attendance:
 - (a) When the school receives notice of the student’s intention to discontinue the training program; or,
 - (b) When the student is terminated for a violation of a published school policy which provides for termination; or,
 - (c) When a student, without notice, fails to attend classes for thirty calendar days.
6. All refunds must be paid within thirty calendar days of the student’s official termination date.

Notice to Buyer:

Do not sign this agreement before you read it or if it contains any blank spaces. This is a legal document. All pages of this agreement are binding. Read both sides of all pages before signing. You are entitled to an exact copy of the agreement, school catalog, and any other papers you may sign and are required to sign a statement acknowledging receipt of those.

Cancellation of Contract:

If you have not started training, you may cancel this contract by submitting written notice of such cancellation to Still Waters Massage Institute at its address shown on the contract, which notice shall be submitted not later than

midnight of the fifth business day (excluding Sundays and holidays) following your signing this contract or the written notice may be personally or otherwise delivered to Still Waters Massage Institute within that time. In event of dispute over timely notice, the burden to prove service rests on the sender.

Unfair Business Practices:

It is an unfair business practice for Still Waters Massage Institute to sell, discount, or otherwise transfer this contract or promissory note without the signed written consent of the student or his/her parent or guardian if he/she is a minor and a written statement notifying all parties that the cancellation and refund policy continues to apply.

Student's Name

(Please print)

Signature

Date

Parent or Guardian's Name

(Please print)

Signature

Date

As the authorized representative of the school, I hereby agree to the conditions set forth herein:

Authorized Still Waters Massage Institute Representative

(Please print name)

Signature

Date

This school is licensed under Chapter 28C.10 RCW. Inquiries or complaints regarding this private vocational school may be made to the:

Workforce Board, 128 – 10th Ave. SW, Box 43105, Olympia, Washington 98504

Web: wtb.wa.gov

Phone: 360-753-5662

E-Mail Address: wtecb@wtb.wa.gov



INSTITUTE

1800 Bickford Ave Suite 202

Snohomish, WA 98290

425-308-1030

massagestillwaters@yahoo.com

Entrance Requirements

Students applying at Still Waters Massage Institute must be at least 18 years of age and have a high school diploma or equivalent. Admission will be determined on a first come, first serve basis. Class sizes will not exceed 14 students per class. Tuition must be paid in full at the start of the year, or every 9 weeks via the payment plan. Students may apply for a work program that will help work off part of their tuition, but only one person from each class (day and night class) may be picked. The student will be working at our parent company Still Waters Massage Clinic also located on Bickford Avenue.



INSTITUTE

1800 Bickford Ave Suite 202
Snohomish, WA 98290
425-308-1030
massagestillwaters@yahoo.com

Code of Conduct

The following conduct is unacceptable and will not be tolerated:

1. All forms of bias including race, ethnicity, gender, disability, national origin, and creed as demonstrated through verbal and/or written communication and/or physical acts.
2. Sexual harassment including creating a hostile environment and coercing an individual to perform sexual favors in return for something.
3. All types of proven dishonesty, including cheating, plagiarism, knowingly furnishing false information to the institution, forgery, and alteration or use of institution documents with intent to defraud.
4. Intentional disruption or obstruction of teaching, administration, disciplinary proceedings, public meetings and programs, or other school activities.
5. Theft or damage to the school premises or damage to the property of a member of the school community on the school premises.
6. Violation of the law on school premises. This includes, but is not limited to, the use of alcoholic beverages or controlled dangerous substances.



Still Waters Massage Institute
 1800 Bickford Ave Suite 202
 Snohomish, WA 98290
 425-308-1030
 massagestillwaters@yahoo.com

ENROLLMENT AGREEMENT

This Enrollment Agreement is between the Still Waters Massage Institute and:

STUDENT'S NAME _____ Telephone _____

Address _____

The Still Waters Massage Institute agrees to provide the following training:

Course or program title: _____ Massage Therapy Program _____

Start date: _____ Completion date: _____

Program consists of 39 weeks x 17.72 hours per week = 691 total hours.

This training will cost:

Registration fee	\$ <u>50.00</u>
Tuition	\$ <u>15,000.00</u>
Books	\$ <u>500.00</u>
Supplies and Materials	\$ <u>1,300.00</u>
Other fees and charges	\$ <u>1,150.00</u>
TOTAL COST FOR THE COURSE	\$ <u>18,800.00</u>

Down payment

Monthly payments

Agreement is Binding:

This agreement will be binding only when it has been fully completed, signed, and dated by the student and an authorized representative of the school prior to the time instruction begins.

Changes in the Agreement:

Any changes in the agreement will not be binding on either the student or the school unless such changes are acknowledged in writing by an authorized representative of the school and by the student or the student's parent or guardian if he/she is a minor.

Effective Date of Acceptance:

_____ Date



Still Waters Massage Institute
1800 Bickford Ave Ste 202
Snohomish, WA 98290

EMPLOYMENT

Current or most recent employer: _____

Supervisor: _____ Phone: _____

Start and End Date: _____

HEALTH HISTORY

By signing this agreement and release you agree to release Still Waters Massage Institute from any liability for any physical condition or injury caused, aggravated, or affected by your participation in the program(s) or any courses taken at the Institute. You may be required to provide a physician's certificate describing any physical condition you disclose on this application stating whether or not the condition would be affected by your participation in the course(s) of study. Answer the following questions by checking the appropriate yes or no boxes to the right of the form.

Yes No

<input type="checkbox"/>	<input type="checkbox"/>	Do you have any physical or mental conditions, including but not limited to, injuries or disabilities that could affect or prevent you from performing any massage techniques?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have or have you ever been diagnosed with a lower back condition, injury or disorder?
<input type="checkbox"/>	<input type="checkbox"/>	Do you now or have you ever been diagnosed as having any hand, arm or forearm condition or disorder?
<input type="checkbox"/>	<input type="checkbox"/>	Are you taking any prescribed medication that will affect or impair your ability to participate in or complete the program(s)?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have a documented learning disability? If so please state: _____

If you checked yes for any of the questions above please describe below.

Current Physician: _____ Phone: _____

Address: _____

Date of last Physical Examination: _____



Still Waters Massage Institute
1800 Bickford Ave Ste 202
Snohomish, WA 98290

OTHER

Have you ever been convicted of a felony or misdemeanor other than traffic violation? _____

If yes, please explain: _____

Drivers License / ID Number: _____ Issue date: S _____

Why do you want to attend Still Waters Massage Institute, and what are your expectations?

What are your biggest motivations in life?

Printed Name: _____

Signature: _____ Date: _____