Student Name: ______________________________________________________

Address (City/State/ZIP): ____________________________________________

Email: _________________________ Phone: ____________________________

Date Program Begins: ___/___/___ Ends: ___/___/___

Program or Course

- Massage Therapy Day (750 Hour) 40 wks required 20 Hours per week
- Massage Therapy Eve (750 Hour) 63 wks required 12 Hours per week
- Massage Therapy (650 Hour) 22 wks required 30 Hours per week
- Massage Therapy (650 Hour) 52 wks required 12 Hours per week

Clock Hours: ______

Entrance Requirements for all programs listed above:

- High School Diploma/GED
- TB Test within 12 months of start date with supportive documentation
- Photo Id with proof of age (must be at least 17 years of age)
- Interview with admissions representative
- International students must provide Proof of Residency Status
- A valid alien registration card is required for all eligible non-citizens

Period Beyond Which Late Registration Will Not Be Accepted:

- Second day of respective program

Student’s Method of Payment

<table>
<thead>
<tr>
<th></th>
<th>Cash</th>
<th></th>
<th>Private Student Loan</th>
<th></th>
<th>Federal or State Student Loan</th>
<th></th>
<th>Credit Card</th>
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<tr>
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<th>750 Hour Program</th>
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<tbody>
<tr>
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<td>$9,350</td>
</tr>
<tr>
<td>Uniforms:</td>
<td>$100</td>
</tr>
<tr>
<td>Text Materials:</td>
<td>$500</td>
</tr>
<tr>
<td>Supplies:</td>
<td>$500</td>
</tr>
<tr>
<td>Administrative Fee:</td>
<td>$50</td>
</tr>
<tr>
<td>Total Charges:</td>
<td>$10,500</td>
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</tbody>
</table>

Discounts*: $________

Adjusted Total Charges: $________

*Explanation of Discounts:

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Discounts*: $________

Adjusted Total Charges: $________

*Explanation of Discounts:
ESTIMATE OF ADDITIONAL EXPENSES TO BE INCURRED BY MASSAGE STUDENT:

WHITE RUBBER SOLED SHOES: $40
SUPPLIES (PENS, PAPER, COMBINATION LOCK): $10

MASSAGE TABLE:

NEW $250 – 500
USED (VIA EBAY/ CRAIGSLIST/ETC.): $100 - 200

MASSAGE LICENSE FEE: $225

TRANSCRIPT FEE: $10

REFUND POLICIES (AS PER M.G.L. CHAPTER 255, SECTION 13K):
1. You may terminate this agreement at any time.
2. If you terminate this agreement within five days you will receive a refund of all monies paid, provided that you have not commenced the program.
3. If you subsequently terminate this agreement prior to the commencement of the program, you will receive a refund of all monies paid, less the actual reasonable administrative costs described in paragraph 7.
4. If you terminate this agreement during the first quarter of the program, you will receive a refund of at least seventy-five percent of the tuition, less the actual reasonable administrative costs described in paragraph 7.
5. If you terminate this agreement during the second quarter of the program, you will receive a refund of at least fifty percent of the tuition, less the actual reasonable administrative costs described in paragraph 7.
6. If you terminate this agreement during the third quarter of the program, you will receive a refund of at least twenty-five percent of the tuition, less the actual reasonable administrative costs described in paragraph 7.
7. If you terminate this agreement after the initial five day period, you will be responsible for actual reasonable administrative costs incurred by the school to enroll you and to process your application, which administrative costs shall not exceed fifty dollars or five percent of the contract price, whichever is less. A list of such administrative costs is attached hereto and made a part of this agreement.
8. If you wish to terminate this agreement, you must inform the school in writing of your termination, which will become effective on the day such writing is mailed.
9. The school is not obligated to provide any refund if you terminate this agreement during the fourth quarter of the program.

Administrative Costs Equal: $50

ADDITIONAL REFUND POLICIES FOR STUDENTS WITH FEDERAL LOANS
(AS PER USDOE – U.S. DEPARTMENT OF EDUCATION):
Students receiving assistance from Federal Title IV programs may be subject to a special refund or return to Title IV requirements as of 10/07/2000 per Federal Regulations, provided they have completed less than 60% of the payment period for which aid was or could have been disbursed. Federal regulations require the return of Title IV funds in the following order if applicable; Unsubsidized loans, Subsidized loans, Perkins loans, Plus Loans, Pell Grants, SEOG, or other Title IV. All other monies paid by students are subject to the Commonwealth of Massachusetts’ refund policy.

I have been provided a copy of the school’s catalogue and policies in a manner of my choosing and I am initialing my choice: ___ Hard copy ___ Send via email
Please initial the following:

___ I understand this contract will not be in force and effect until signed by both myself and a school representative.
___ I have received a copy of the school’s complaint procedures policy.
___ I understand the refund policy as stated above.
___ I understand that coursework and/or credit from this school may not be transferable to other institutions of education and acceptance is at the discretion of the receiving institution.

This school is licensed by the Massachusetts Department of Elementary and Secondary Education, Office of Proprietary Schools. Any comments, questions, or concerns about this school’s license should be directed to proprietaryschools@doe.mass.edu or 781-338-6048.

STUDENT’S SIGNATURE:
________________________________________________________________________ DATE:

PRINT STUDENT’S NAME:
________________________________________________________________________

IF THE STUDENT IS UNDER THE AGE OF 18,

PARENT/GUARDIAN:
________________________________________________________________________ DATE:

PRINT PARENT/GUARDIAN’S NAME:
________________________________________________________________________

SCHOOL OFFICIAL’S SIGNATURE:
________________________________________________________________________ DATE:

PRINT SCHOOL OFFICIAL’S NAME:
________________________________________________________________________

I, the student, have received a completed and signed copy of this agreement on date:_____________(student’s initials)