

## Therapeutic Training Center, Inc.

PO Box 66864, Seattle, WA, 98166 | P: 206.853.6875 | F: 206.243.5185 | www.theratraining.com

This Enrollment Agreement, is between the above-named school and

STUDENT'S NAME \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

The school agrees to provide the following training:

Course or program title: \_\_\_\_\_

Starting date: \_\_\_\_\_ Completion date: \_\_\_\_\_

Total \_\_\_\_\_ hours

### This Training Will Cost:

Tuition (Introductory Workshop and Advanced Classes except Unwinding) -- early registration.....\$545

Tuition (Introductory Workshop and Advanced Classes except Unwinding) -- late registration.....\$595

Tuition (Unwinding only).....\$595

Reviewers Tuition (Introductory Workshop and Advanced Classes except Unwinding).....\$300

Reviewers Tuition (Unwinding Only).....\$350

A \$100 deposit will hold the student's place in class, balance is due on or before the first day of class.

### 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.

### Effective Date of Acceptance:

I certify that I have read and understand the cancellation and refund policy and the complaint procedure; and I am entitled to an exact copy of this Enrollment Agreement, class brochure, and any other papers I sign. I hereby agree to abide by the conditions set forth herein.

### Introductory Workshop and Stand-Alone Advanced Bodywork Cancellation Policy:

1. Cancellation of Class: If a class is canceled for any reason, participants will be sent a 100% refund within 30 days of the class being cancelled.
2. Student Not Accepted: If the applicant is not accepted for a class, the applicant will be sent a 100% refund within 30 days of the decision not to accept the student.
3. Cancellation Within Five Business Days of Application: In the event that a participant cancels within five business days (excluding Sundays and holidays) of registering, the participant will be sent a 100% refund within 30 days of receipt of written notice of the cancellation.

4. Cancellation within 30 days of the First Day of Class: The applicant will be sent a refund less a \$50 administrative fee within 30 days of receipt of written notice. Instead of being charged the fee, the applicant may choose to put monies toward another class taught by the Instructor.
5. Termination of Training Once Class Has Begun: If a student's last day of attendance (LDA) is determined to be the first day of a 4-day class, the Center will retain 25% of tuition paid for that class. If the student's LDA is the second of the class, the Center will retain 50% of tuition paid for that class. If the student's LDA is any time after the second day of the class, the Center will retain 100% of tuition paid for that class.
6. When calculating refunds, the official date of a student's termination is the last day of recorded attendance (LDA):
  - When the school receives written notice of the student's intention to discontinue the training program; or,
  - When the student is terminated for a violation of a published school policy which provides for termination; or,
  - When a student, without notice, fails to attend class, see the attendance policy in the student handbook for further details.
7. All refunds will be paid within 30 calendar days of the student's date of determination for the termination.

#### **Termination by the School:**

A student who fails to maintain satisfactory progress, violates safety regulations, interferes with other students' work, is disruptive, obscene, under the influence of alcohol or drugs, or does not make timely tuition payments, is subject to immediate termination.

#### **Cancellation of Classes:**

The school 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.

#### **Re-enrollment:**

Should a student not be able to finish, the student may reenter the next available class.

#### **Complaints, Suggestions, or Problems**

It is the responsibility of the individual experiencing the problem to pursue resolution. Students may seek to explore problems and potential resolution with professional resources outside the classroom while maintaining confidentiality. We encourage students to address their problems with others (including classmates, teachers, or staff) directly and in a timely and respectful manner. A consenting, mutually-agreed upon 3<sup>rd</sup> party can be invited to witness the conversation. Avoid triangulation and gossip. However, students are encouraged to discuss the issue with an assistant, the teacher, or a staff member in order to strategize a resolution.

Formal written complaints may also be used and are expected to be done respectfully, clearly, and with the intent of finding resolution. Written complaints should be delivered to teachers or staff members of NHRC. NHRC will seek to address the complaint by bringing the appropriate parties together for a supervised resolution process. Expenses are the responsibility of the student.

If the student is dissatisfied with the results of the process, the student may put the issue in writing and submit it to: Workforce Training And Education Coordinating Board Private Vocational School Licensing at PO Box 43105, Olympia, WA 98504.

#### **Classroom and Class Size**

The classroom is located at the Natural Health Resources Center at 12252 2<sup>nd</sup> Ave NW in Seattle. ratio of 1 teacher to 40 students is maintained.

#### **Verification of Continuing Education Credit**

We maintain class records for fifty years. Upon completion of Introductory Workshops, individual Advanced Bodywork class and cranio-sacral programs, each student is provided with a certificate of completion. If this becomes lost and proof of credit or a duplicate is required, a written request for verification is needed--there is a \$10 processing fee. A written request may be made by mail, fax or email. Please provide:

- Student name (current and name at the time the class was taken)
- Course title
- Name of instructor
- Date of class
- Address the verification is to be sent to

Please contact NHRC at 206-783-3922 or email [admin@ursulapopp.com](mailto:admin@ursulapopp.com).

### **Limitations of Liability**

The Natural Health Resources Center (NHRC) and the Therapeutic Training Center (TTC) are not responsible for any loss or damage to participant personal property. While participants are on NHRC/TTC premises or at any contracted facility of NHRC/TTC, NHRC/TTC are not responsible for any personal injury, loss or damage to property suffered by participants. Participants are responsible for maintaining their own professional liability insurance.

### **Statement of Ownership**

The Natural Health Resources Center is a not-for-profit company comprised of the following board: President - Sandi Cutler; Secretary – Beth Oppliger; Director – Ursula Popp. The Therapeutic Training Center's sole shareholder is Robbin Blake.

### **Approvals and Accreditations**

National Certification Board for Therapeutic Massage and Bodywork

- The Natural Health Resources Center is approved by the National Certification Board for Therapeutic Massage And Bodywork (NCBTMB # 322123-00) as a continuing education provider.

Workforce Training and Education Coordinating Board

- The Therapeutic Training Center is licensed by the Workforce Training and Education Coordinating Board.

### **Discontinued Programs:**

If the school discontinues instruction in any program after students enter training, including circumstances where the school changes its location, students must be notified in writing of such events and are entitled to a pro-rata refund of all tuition and fees paid unless comparable training is arranged for by the school and agreed upon, in writing, by the student. A written request for such a refund must be made within 90 days from the date the program was discontinued or relocated and the refund must be paid within 30 days after receipt of such a request.

### **Location:**

It is anticipated that the location will be changed to an auxiliary location prior to the start of the programs. Students will be informed in writing of the new location, which will remain in Seattle.

**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, student handbook 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 the school 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 the school 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 the school 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 name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

Authorized School Representative

\_\_\_\_\_  
(Please print name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This school is licensed under Chapter 28C.10 RCW. Inquiries or complaints regarding this or any other private vocational school may be made to the Workforce Training and Education Coordinating Board, 128 Tenth Avenue SW, PO Box 43105, Olympia, Washington 98504-3105 (360/753-5662).

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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 the above named school 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 this school, 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\_\_\_\_