



Bridging the Gap Between Academic and Practical Application

ENROLLMENT AGREEMENT

Student Information

Date: _____

Name: _____ Semester / Year: _____

Date of Birth: _____

Present Address:	Permanent Address:
_____	_____
_____	_____
_____	_____

Telephone # 's: Home: _____ Cell: _____

Email: _____

Program Information

Program Enrolling for: _____ Start Date: _____

Program Length: (months/clock hours) _____

Financial Information

Total cost for the _____ pathway/program:

Tuition: \$ _____

Investments: \$ _____



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Administration/Registration Fee: \$ _____

Books/Supplies: \$ _____

Total Program Cost: \$ _____

Tuition Down Payment: \$ _____

Student Initials: _____

Tuition and Fees

Pathway 1: Clinical Massage & Bodywork Integration Program is a 930-clock hour certification program. A clock hour is defined as a 50-minute block of instruction and a 10-minute break. The total cost of the program is \$10,022.80, which consists of an application fee (\$75.00), deposit fee (\$157.00), and tuition (\$9,720.80). Tuition is based on a per clock hour charge.

Application fee — \$75.00 (non-refundable)

Deposit fee - \$157.00 (non-refundable)

Tuition (before investments) — \$9,076.80

- IFTA Personal Trainer Certification - \$99.00
- Two Fit Pros Nutritional Coach Certification - \$350.00
- The Federation of State Massage Therapy Boards (FSMTB) and the Massage & Bodywork Licensing Examination (MBLEx) fee - \$265.00

Tuition (after investments) - \$9,790.80

TOTAL — \$10,022.80

Tuition is based on a per clock hour charge.

Payment method can be credit card, or money orders.

Tuition and associated fees must be paid in full before a student's expected graduation date.



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All students receive a Textbook Starter Package (First Semester Survival Kit) that is valued at \$300.00

Pathway 2: Osteopathic Manual Practice (OMP) is a certificate Program. The total cost of the programs are as follows:

Certificate in Osteopathic Manual Practice (OMP) (for students without prior health education)

1-year full time or 2 years part time

(Begins every August & February)

Tuition (Campus-Based Program) \$11,000.00

Certificate in Osteopathic Manual Practice (OMP) (for students with prior health education)

Accelerated Program for Health Professionals

6 months full time or 12 months part time

(Begins every August & February)

Tuition (Campus-Based Program) \$7,000.00

Additional Fees:

Application Fee — \$75.00 (Non-refundable)

Deposit Fee - \$157.00 (Non-refundable)

Tuition (Before Additional Fees) \$7,000.00 with prior health education
\$11,000.00 without prior health education

Tuition (After Additional Fees) \$7,232.00 with prior health education
\$11,232.00 without prior health education

Payment method can be credit card, or money orders.

Tuition and associated fees must be paid in full before a student's expected graduation date.

Modified Winter 2021

Pathway 1: Clinical Massage & Bodywork Integration Program is a 930-clock hour certification program. A clock hour is defined as a 50 minute block of instruction and a 10 minute break. Students enrolled in the Modified Fall 2020 program will receive a 6 month version of Pathway 1.

Total Program Cost: \$6,719.00.



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Application fee — \$75.00 (non-refundable) *WAIVED*

Deposit fee - \$157.00 (non-refundable) *WAIVED*

Tuition (before investments) — \$6,000.00

- IFTA Personal Trainer Certification - \$134.00
- Two Fit Pros Nutritional Coach Certification - \$320.00
- The Federation of State Massage Therapy Boards (FSMTB) and the Massage & Bodywork Licensing Examination (MBLEx) fee - \$265.00

Tuition (after investments) - \$6,719.00

TOTAL — \$6,719.00

Payment method can be credit card, or money orders.

Tuition and associated fees must be paid in full before a student's expected graduation date.

Cancellation & Refund Policy

Rejection

An application rejected by the institution is entitled to a refund of all monies paid.

Three- Day Cancellation

An applicant may cancel this agreement without penalty by notifying the institution within three business days after signing this agreement, excluding weekends and holidays. After the third day, but before classes begin, the institution may retain up to \$100 tuition.

Other Cancellations

If the course is rescheduled due to low enrollment, students will be notified by phone and email. Students will have the choice of a refund or attending the next scheduled class. If the class start date is changed for a second time, the student will be eligible for a full refund of all monies paid.



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Withdrawal

Student(s) who wish to withdraw from this institution after classes begin will be subject to the below refund policy. The institution may retain up to \$100 registration/administrative fee after the three-day cancellation or after classes begin. Refunds are computed in ten-percent increments, rounded downward to the nearest ten percent of that period. After sixty percent of attendance, the institution may charge for the entire course. Refunds are issued within 40 days after the effective date of cancellation or last date attended.

Refund Calculation

Hours Attended	Tuition Refund
1 – 24	90%
305 - 384	80%
385 - 464	70%
465 - 544	60%
545 - 624	50%
625 - 704	40%
705 - 900	0%

Holder in Due Course Statement:

Any holder of this enrollment agreement is subject to all claims and defenses which 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 (FTC Rule effective 5-14-76).

THE STUDENT UNDERSTANDS:

1. Students who have earned credit from previous education and/or training must meet with the director to determine if such credit can be applied towards OHSBI's program, prior to acceptance into the program.
2. The School does not guarantee job placement to graduates upon program/course completion or upon graduation.
3. The School reserves the right to reschedule the program start date when the number of students scheduled is too small.



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4. The School will not be responsible for any statement of policy or procedure that does not appear in the School catalog.
5. The school reserves the right to discontinue the student's training for unsatisfactory progress, nonpayment of tuition or failure to abide by School rules.
6. Information concerning other Schools that may accept the School's credits toward their programs can be obtained by contacting the Admissions Director or Registrar. It should not be assumed that any programs described in the School catalog could be transferred to another institution. The School does not guarantee the transferability of credits to a college, university or institution. Any decision on the comparability, appropriateness and applicability of credits and whether they should be accepted is the decision of the receiving institution.
7. This document does not constitute a binding agreement until accepted in writing by all parties.

Student initial _____

STUDENT ACKNOWLEDGEMENTS:

1. I hereby acknowledge receipt of the School's catalog dated _____, which contains information describing programs offered, and equipment/supplies provided. The School's _____ catalog is included as a part of this enrollment agreement, and I acknowledge that I have received a copy of this catalog.

Student initial _____

2. Also, I have carefully read and received an exact copy of this enrollment agreement.

Student initial _____

3. I understand that the School may terminate my enrollment if I fail to comply with the attendance, academic and financial requirements or if I disrupt the normal activities of the School. While enrolled in the School. I understand that I must maintain Satisfactory Academic Progress as described in the School catalog and that my financial obligation to the School must be paid in full before a certificate may be awarded.

Student initial _____

4. I also understand that this institution does not guarantee job placement to graduates upon program/course completion or upon graduation.

Student initial _____

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OPTIMAL HEALTH School of Bodywork Integration

710 Lowndes Hill Road, Suite A, Greenville, S.C 29607 * 864.735.0358

ohsbi.com * info@ohsbi.com



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Enrollment Agreement:

I, the undersigned, have read and understand this agreement and acknowledge receipt of a copy. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreements and may not be modified without the written agreement of the student and the School Official. I also understand that if I default upon this agreement, I will be responsible for payment of any collection fees or attorney fees incurred by **OPTIMAL HEALTH School of Bodywork Integration**.

My signature below signifies that I have read and understand all aspects of this agreement and do recognize my legal responsibilities in regard to this contract.

Signed this _____ day of _____ 20____

Signature of Student

Date

Signature of School Official

Date

Representative’s certification: I hereby certify that _____ has been interviewed by me and in my judgment, meets all requirements for acceptance as a student. I further certify that there have been no verbal or written agreements or promises other than those appearing on this agreement.

By: _____

Date: _____

Student initial _____