

PREPAID WELLNESS MEMBERSHIP APPLICATION AND AGREEMENT

Member Name:				
Street Address			Mo. Amount \$	
City	State	Zip	Initials	
Phone:	Email		Date	
MONTHLY MEMBERSHIP TYPE		BENEFITS OF MEM	1BERSHIP	
One 60-Minute session for \$75 per m	nonth			
Two 60-Minute sessions for \$150 per month		♦ Monthly services at a d	iscounted rate	
One 90-Minute session per month for \$105 per month		Free 30-Minute session12 and 18 month plans		
Two 90-Minute sessions per month for	or \$210 per month	♦ 10% off one additional month	† 10% off one additional session per month	
MEMBERSHIP DURATION		♦ 10% off unlimited Gift (Cautificatos	
☐ 6 Months ☐ 12 Months*	☐ 18 Months*	♦ Birthday massage disco		
MEMBERSHIP PAYMENT SELECTION				
Please charge my card on the 1^{st} and no later than the 5^{th} of each month Please charge my card on the 15^{th} and no later than the 20^{th} of each month				
*One free 30-minute session or add-on per contract term for 12 month plans or two free 30-minute sessions or add on per contract term for 18 month plans.				
CREDIT CARD INFORMATION				
(Credit Card information will be shredded	l once entered in our	secure system)		
CVV code (three digit code on back of car	d)	Expiration Date		
Billing Address (if different from above) State	City	Zip		

AGREEMENT TERMS AND CONDITIONS

Monthly memberships are valid towards all massage and Reiki Sessions. Acupuncture, nutritional counseling and insurance massage are excluded from this offer. Your membership status must be active in order to redeem membership services and benefits.

This membership entitles you to one or two pre-paid sessions per month for the duration marked on the Application in accordance with Washington State Laws and Statutes. You are also entitled to one additional service within the same month at a discount rate of 10%. Gift certificates purchased for anyone other than the member purchasing the certificate may be purchased at a discount rate of 10%. You are entitled to one free 30-minute session or add-on per contract term for 12 month plans or two free 30-minute sessions or add-on per contract term for 18 month plans. Membership discounts cannot be combined and may not be used with any other offer.

The first monthly fee will be charged at time of contract signing, with subsequent automatic billings being on the 1st or 15th of each month and no later than the 5th or 20th of each month. Payment for any additional benefits used will be collected on the day of service or date of sales transaction.

The membership monthly fee is specified on the application above. As long as your membership monthly payment is made you will be considered an active member in good standing.

Please read and initial the terms of the contract below:

schedule	Unused, prepaid services do not accrue from month to month. As long as I am a member in good standing I may one or two prepaid services per month (between the 1 st and 30 th of each month) in accordance to the agreed terms pplication.
entity.	This membership and services purchased under this membership are non-transferable to any other person or
	We will use our best efforts to process all your payments properly. However, we shall incur no liability if we are completely process any of your payments because of the existence of any of the following circumstances:
tl	f through no fault of ours, your payment account does not contain sufficient funds to complete the transaction or he transaction would exceed the credit limit of your credit card, or your payment account or credit card does not otherwise permit the transaction to be executed; or
2. Y 3. C	You have not provided us with the correct account information to process your payment accurately; or Circumstances beyond our control, such as but not limited to fire, flood, acts of war, terrorism or the other interference from an outside force, prevent the proper execution of the transaction and we have taken reasonable precautions to avoid those circumstances.
informati	For purposes of identification and billing, you agree to provide us with current, accurate, complete and updated ion including your name, address, telephone number and applicable payment data. You agree to notify us of any changes in your membership data.

We reserve the right to revoke membership at any time for misconduct or lewd behavior on our premises. You will be responsible for payment in full upon revocation of membership. We reserve the right to change pricing at any time upon reasonable notice. Should prices increase, you have the right to cancel membership without penalty during initial period following cancellation guidelines as described below.

month-to-month basis at the predetermined rate until your membership is cancelled or terminated as provided in this agreement. The first automatic payment will be charged to your card the month following your membership sign-up date.

Memberships may be renewed which will entitle you to the additional 30-minute session or add on(s).

Your membership is auto-renewable. Following the initial term, your membership will automatically continue on a

You have the right to receive a notice of change in the event that we make any change to the terms and conditions of your membership that will vary the amount to be periodically billed to your account specified above. We will send you a notice of change at the mailing address on the Application at least ten days prior to the effective date of such change. Except as expressly provided herein, we may modify our services or the terms and conditions of this Agreement at any time without notice and such modifications shall be deemed effective immediately upon making such changes.

CANCELLATION POLICY & PROCEDURE

CANCEL	LING YOUR	APPOINTMENT:

You may cancel your appointment without charge if you cancel within 24 hours of your appointment. Same day cancellations or not showing up for you appointment will result in forfeiture of that scheduled appointment.

CANCELLATION OF MEMBERSHIP DURING INITIAL TERM: You may cancel this agreement during the initial term of your membership upon the following conditions:

- ◆ Your death or permanent physical disability.
- ♦ You have a physician's note certifying that you are unable to receive massages.
- ♦ You move 20 miles away. If living 20 miles away at time of signing this Agreement, this condition is void, unless you move to a new location. Proof of new address will be required.
- * Rhea Healing Essentials increases the cost of membership.

_____Cancellation of membership outside of the accordance of this agreement will result in a charge for two months of contracted membership services at time of cancellation effective date and services will be forfeited.

CANCELLATION OF MEMBERSHIP DURING AUTO RENEW TERM

After the initial term you may cancel at any time. All cancellations require 30 days written notice and are effective within 10 business days after the 30 day notice period. Payments due prior to the effective date will be charged as scheduled. Pre-paid memberships have no cash value, and services expire 6, 12, or 18 months from date of purchase according to agreed terms. We reserve the right to terminate or deny re-enrollment for an indeterminate amount of time if you have an unsatisfactory payment history.

If your membership account becomes delinquent and is not properly cancelled, the account will be referred to collections and you agree to pay all reasonable collections, agency fees, and legal costs incurred.

DISCLAIMER OF LIABILITY

You understand and voluntarily accept any risks associated with your treatment or the use of our facilities. Except where prohibited by law, you agree that Rhea Healing Essentials will not be liable for any injury, including, without limitation, personal, bodily, or mental injury, economic loss, or any damage to you resulting from negligence, other acts of Rhea Healing Essentials, anyone on Rhea Healing Essentials' behalf, or anyone using the services and/or facilities of Rhea Healing Essentials.

By signing below, I authorize Rhea Healing Essentials to charge the account I have specified on the Application. Monthly dues and/or renewal fees (plus all applicable taxes) will be withdrawn on the 1st or 15th and no later than the 5th or 20th of each month depending on payment plan selected. I understand that Rhea Healing Essentials may continue to charge my account or cancel my membership in accordance with the terms and conditions of this agreement. Additionally, I authorize Rhea Healing Essentials to charge my credit card on file in lieu of presenting it for any services received, at my request. I agree to pay for the membership, according to the payment schedule above. My signature below indicates my agreement to be bound by the terms, conditions, rules, and regulations of this Agreement.

If through no fault of ours, your payment account does not contain sufficient funds to complete the transaction, or your payment account or credit card does not otherwise permit the transaction to be executed, you will be charged a \$35 insufficient funds fee. We will contact you to update your account with a working payment method.

I ACKNOWLEDGE RECEIVING AND READING A COMPLETED COPY OF THIS APPLICATION AND AGREEMENT BEFORE SIGNING. I UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS OUTLINED IN THIS AGREEMENT.

Member Signature	Member Printed Name
Date	Rhea Healing Essentials' Representative