

**General information:**

|  |  |
| --- | --- |
| First name: |  |
| Last name: |  |
| Address: |  |
| City: |  |
| Postal code: |  |
| Country: |  |
| Phone number: |  |
| Email: |  |
| Emergency contact: |  |

**Program:**

Start date:

Expected graduation date:

Our teacher-training program is offered as a 12-month course, consisting of 450 total hours. This program is completed in the classroom.

|  |  |
| --- | --- |
| Tuition: |  |
| Registration fee: |  |
| Books/Supplies: |  |
| Examinations: |  |
| **Total cost**: |  |
| Method of payment: |  |
| Schedule of payments: |  |
| Deposit: |  |
| Monthly payment due date: |  |

**Lessons**

450 hours of lessons are required as part of the program. The lessons must be taken at PMA Sample School.

By signing below, the student agrees to pay PMA Sample School the total stated tuition and fees. The student acknowledges that they have received the latest version of the school’s catalog dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The school agrees to provide the occupational training in accordance with the provisions of the Catalog. Payments of all monies due shall be a condition of continuing enrollment. Upon satisfactory completion of all academic and skill requirements detailed in the school catalog and when all financial obligations to the school have been met, the school will award a certificate of completion to the student. The student and school understand that this Enrollment Agreement, which includes the refund policy, may not be amended except in writing and signed by both parties.

**Please read carefully the following:**

1. I have enrolled in a program of instruction in the Pilates Method offered by PMA Sample School. I have been advised and I understand that participation in this program presents some unavoidable risk of injury, especially to people who have pre-existing injuries, illnesses, or medical disabilities. I understand that the use of exercise equipment also carries with it a risk of injury. I have and I will continue to keep PMA Sample School fully informed of any physical condition or disability, which would prevent or limit my participation in the program.
2. I agree to comply with all the rules and directives of the program as outlined in the current school’s catalog, printed and online materials, and lectures.
3. I acknowledge that PMA Sample School Student Intake Form has been fully and correctly completed by me, and that all information provided on that form applies to this program as well, including but not limited to the waiver of liability and informed consent release. I understand that I participate in this program at my own risk and agree to release PMA Sample School, its officers, and representatives from any and all liability resulting from any form of personal and / or physical injury incurred during any movement lessons or procedures performed while a participant in the program or while in PMA Sample School facility.
4. I understand that I have one year to complete the program.
5. If satisfactory progress is not being made, it is grounds of dismissal. Refer to Catalog.
6. I understand that all exams are pass/fail with the passing mark at 85 %. Any failed exam must be repeated, in order to continue my education program. Any retake will cost $85.
7. I understand that my use of all materials, oral or written, presented in PMA Sample School is governed by the Intellectual Property Terms of Use, which I have read and signed.
8. PMA Sample School reserves the right to terminate any student from the program at any time. In the event that a student is terminated from the program, the school shall refund any unused training program money based on the Refund Policy below.

**Refund Policy**

**Sample narrative**

Students not accepted to the school are entitled to all moneys paid. Students who cancel their contract by notifying the school within three (3) business days are entitled to a full refund of all tuition and fees paid. Students, who withdraw after three (3) business days but before commencement of classes are entitled to a full refund of all tuition and fees paid, except the maximum cancellation charge of $150.00, or 25% of the contract price, whichever is less. In the case of students withdrawing after commencement of classes, the school will retain a cancellation charge plus a percentage of tuition and fees, which is based on the percentage of contact hours attended as described in the table below. The refund is based on the official date of termination or withdrawal.

**Refund Table:**

|  |  |
| --- | --- |
| Student is entitled to upon withdrawal / termination: | Refund: |
| Within first 10% of program | 90% less cancellation charge |
| After 10% but within first 25% of program | 75% less cancellation charge |
| After 25% but within first 50% of program | 50% less cancellation charge |
| After 50% of the program | No refund |

**Example:**

Refund based on 12-week program and tuition of $1500 paid in full

|  |  |
| --- | --- |
| Student is entitled to upon withdrawal / termination: | Refund: |
| Within 1st week of program | $1350 less cancellation charge |
| After 1st week but within first 3 weeks of program | $1125 less cancellation charge |
| After 3rd week but within 6 weeks of program | $750 less cancellation charge |
| After 6th week of the program | No refund  |

Students may cancel their contract at any time prior to midnight of the third business day after signing their contract.

All refunds will be made within 30 days from the date of termination. The official date of termination or withdrawal of a student shall be determined in the following manner:

1. The date on which the school receives written notice of the student’s intention to discontinue the training program; or
2. The date on which the student violates published school policy, which provides for termination
3. Should a student fail to return from a leave of absence, the effective date of termination for a student on an extended leave of absence or a leave of absence is the earlier date the school determines the student is not returning or the day following the expected return date.

The student will receive a full refund of tuition and fees paid if the school discontinues a Program within a period of time a student could have reasonably completed it.

The policy for granting credit for previous training shall not impact the refund policy.

By signing below, the student and the school acknowledge the following:

1. Student shall pay PMA Sample School the total stated tuition & fees in accordance to the payment method identified in the agreement.
2. The school agrees to provide the training in accordance with the provisions of the school’s current Catalog Volume No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
3. Payments of all monies due shall be a condition of continuing enrollment. Upon satisfactory completion of all academic and skill requirements and when all financial obligations to the school have been met, the school will award a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the student.

I participate in this program at my own risk and agree to release (PMA Sample School its officers, and representatives from any and all liability resulting from any form of personal and /or physical injury incurred during any movement lessons or procedures performed while a participant in the program or while in the facilities.

**I have received a copy and understand the content of both this enrollment agreement and the current school catalog and I agree to follow all the rules, policies and procedures of the school.**

Student name (print):

Signature:

Date:

School representative name (print):

Signature:

Date: