

Naturopathic Institute of Therapies & Education
503 E Broadway St. Mt. Pleasant MI 48858, Phone 989-773-1714; Fax 989-775-7319

Program Enrollment Agreement

Last name _____ First name _____

<PLEASE PRINT>

Street Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Work Phone (_____) _____

I was referred to NITE by _____



The acceptance and fulfillment of the general terms of this agreement entitle me to the Naturopathic Institute program as outlined in the school's current catalog.

I hereby contract with the Naturopathic Institute for a program of instruction in the following:

- Please check only one _____ Therapeutic Bodywork Practitioner
_____ Natural Health Educator (1st year Freshman)
_____ Natural Health Therapist (2nd year Sophomore; I have completed the 1st year Freshman)
_____ Natural Health Practitioner (3rd year Junior; I have completed the first two years)
_____ Certified Naturopath (4th year Senior; I have completed the first three years)
_____ Holistic Labor Companion Program (6 month program, plus additional 100 hours of internship)

Tuition and Programs:

- **Natural Health Educator (1st year Freshman) • Natural Health Therapist (2nd year Sophomore) • Natural Health Practitioner (3rd year Junior)**
- **Certified Naturopath (4th year Senior) program \$5600 (or \$4995 if paid in full prior to the first class)**
Includes tuition for all class sessions, all required books and materials, professional massage table, accessories and participation in graduation ceremony.
- **Therapeutic Bodywork Practitioner program \$6600 (or \$5995 if paid in full prior to the first class)**
Includes tuition for all class sessions, all required books and materials, professional massage table and accessories and participation in graduation ceremony. You will be required to bring note-taking materials, five twin-size sheet sets, and two towels (one bath and one hand).
- **Holistic Labor Companion program \$2795 (or \$2495 if paid in full prior to the first class)**
Includes tuition for all class sessions, all required books and materials, a bag of birth assisting supplies, and participation in graduation ceremony.

Cancellation/Withdrawal/Refund Policy:

*All tuition and fees paid by the applicant shall be refunded if requested within three business days after signing this agreement with the school. All refunds shall be returned within 30 days. **After the three-day period has expired, all tuition is non-refundable.** If a student cannot attend a scheduled diploma class, a written notice must be given 14 days prior to the class date. If the notice is not received in time an additional \$100 retake fee is required to attend the class, the next time it is available. Tuition will be held for three years from date of registration and is subject to increases.*

Payment Plan:

Our payment plan requires \$2,000 down and monthly payments (\$300 for Natural Health programs; \$383.33 for Therapeutic Bodywork Practitioner program) for 12 consecutive months. Holistic Labor Companion program payment plan requires \$750 down and monthly payments \$340.83 for 6 consecutive months. Payment plan is subject to approval by the Institute and a one-time non-refundable \$25 fee for credit processing is required with application. By signing the application, the student authorizes the school to pull their personal credit report in connection with the payment plan option for financing. Fee is only required by student selecting the payment plan option. Check below method of payment:

_____ I will need the Payment Plan. _____ I will seek financing on my own.

(Please continue on reverse side.)

Enrollment Agreement, revised 4/11/2011

Important Additional Information:

1. I understand that all expenses incurred while traveling to and from school/training location and expenses for food and lodging while in training shall be borne by me.
2. I understand that the school reserves that right to change the opening and closing dates of its classes, hours of instruction, equipment, faculty, tuition rates, and fees. However, there will be no price changes for students enrolled under the terms of the contract signed during the 13 months for which they have enrolled. A new contract will be signed by both the students and the school if any changes are made to their current contract.
3. I, the student, hereby release, hold harmless, and indemnify the Naturopathic Institute of Therapies and Education, its agents and representatives from and against all liabilities, damages, and other expenses which may be imposed upon, incurred by, or asserted against it or them, by reason of bodily injury or property damage which I may suffer, from any cause, while a student in the training program of the school.
4. In the event of labor disputes or acts of God, (i.e., fire, flood, hurricane, tornado, etc.), the school reserves the right to suspend training at the resident site(s) affected.
5. The school reserves the right to cancel an enrollment if student does not achieve the academic requirement established by the school for the program.
6. The school reserves the right to set class schedules according to student enrollments and equipment availability.
7. The school reserves the right to enact and provide notice of rules and regulations governing the conduct of students while attending the school. Violation of these rules and regulations will constitute grounds for dismissal.
8. I acknowledge the reading, agreement and receipt of the school's current catalog.
9. The invalidity or unenforceability of any particular provision of this agreement shall be construed in all respects as if such invalid or unenforceable provisions were committed.
10. I understand that as a student if I wish to file a complaint, I may do so with the State of Michigan at www.michiganps.net.
11. I understand that it is not possible for the Naturopathic Institute of Therapies and Education to guarantee employment. The school assists graduates by making their names and qualifications available to companies that, upon request, have contacted the school.
12. I understand there will be portions of both the class work and the directed studies that will require giving and receiving bodywork. I am willing and able to perform all the physical aspects as well as receive bodywork that is required in those courses.

Disclosure Statement: *It is important that applicants keep a copy of any contract or application to document their enrollment, tuition, receipts or canceled checks to verify the total amount of tuition paid, and records which show the percentage of the program which has been completed. This information can be obtained by a request in writing to the Administration Office. I hereby acknowledge receiving a completely filled in copy of this agreement and a current student publication catalog, which I have retained for my records. I also acknowledge that no verbal promises or statements contrary to the terms of this agreement have been made, and I certify that the aforementioned statements of the Naturopathic Institute representative are true and correct. I understand that this contract is legal and binding once it has been signed and dated by the Naturopathic Institute of Therapies and Education's school representative.*

I understand the aforementioned statements and agree to abide by them. I understand both the school catalog and the Enrollment Agreement and agree to the School Policies of Conduct and refunds. I hereby apply for enrollment.

Student Signature

Date

School Representative

Date



In order to complete the enrollment process, please include a copy of your photo identification; a copy of your high school diploma, GED transcript, or equivalent; and payment in the amount required.

Method of Payment: Amount \$ _____ : ___ Cash / ___ Check / ___ Money Order / ___ Credit Card

Card # _____

Expiration Date _____ CRV _____

Card Holder Name _____

Signature _____

Address _____

Phone Number _____