



Application for Admission & Enrollment Agreement
 2940 Webster Street, Oakland, CA 94609
www.mckinnonmassage.com (510) 465-3488

Please print. Forms must be filled out completely and returned before the first day of class.
The California Massage Therapy Council requires a copy of CA government-issued photo ID. A copy of your state-issued photo ID must be included with this form.

Name: _____ Birthdate: _____
(full legal name) (required by the CAMTC)

Address: _____ Last 4 digits of Social Security # _____

City, State, Zip: _____ Driver's License # _____

Phone Number: _____ Email: _____

Graduated High School/Equivalent : Yes No

Name of School: _____ Year of Graduation: _____

If you are enrolling in a Program, we will need a copy of your High School Diploma or equivalent.

500-Hour Program Requirements:

Completion of the following elements and courses within 2 years of the first day of class:

- 100 hours Swedish Massage**
- 150 hours Shiatsu & Acupressure Foundations **OR** Deep Tissue Foundations
- 125 hours 125-hour course of your choice
- 112 hours Electives of your choice
- 8 hours Getting Noticed and Getting Hired
- 3 hours Instructor Massage
- 2 hours Program Review and Final Evaluation

*Program **must** include Anatomy & Physiology: Human Structure and Movement (64 hours).

**Complimentary ABMP Student Membership is activated at the end of Swedish or first program course.

500-Hour Program Cost: \$8105

Payment Options

Pay in Full: Total due: \$7295 (10% discount applied for paying in full)

Pay as you go: Upon enrollment in Program, receive 5% off program courses.
 \$250 non-refundable program deposit is due upon enrollment.
 Register for each course in your program by paying non-refundable deposit.
 The balance of tuition is due on or before the first day of each course.

Payment Plan: \$300 non-refundable deposit + \$50 payment plan fee due at enrollment 19
 monthly payments of \$395, 1 (final) payment of \$300
 First payment due on first day of class.
 Total due: \$8155

Admissions Requirements:

Minimum requirements to enroll at McKinnon: persons must be over 18 years of age, be able to communicate in and read basic English, and be able to understand and follow instructions.

*The STRF Fee calculated into Total Cost, as specified above, is the State of California Student Tuition Recovery Fund fee. It is a student tuition insurance fee established by the State Legislature and is intended for all students attending private vocational schools. McKinnon is required to collect this non-refundable fee from students. The fee accumulates at \$0 per \$1,000 tuition/registration fees paid. For more information, please contact the Bureau for Private Postsecondary Education at (916) 431-6959 or (888) 370-7589 or visit the website at www.bppe.ca.gov.

I would like to enroll as a Program Student and understand my status as "Program Student" is based on completion of requirements listed above. There is no additional fee associated with Program status. If I elect to withdraw from Program status at any time, I may continue my coursework, but I will be responsible for reimbursing McKinnon for ABMP student membership fees. Pay in Full discounts are for Program students only. If I elect to take advantage of this discount, I understand I will be responsible for paying the difference in tuition for the hours I complete at full price.

Program Start Date: _____ Program End Date: _____

Student Signature

Date

If you are enrolling as Non-Program, non-refundable deposits for each course must be paid in advance. The balance of tuition is due on or before the first day of class.

Non-Program Students

I am not interested in participating in a Program at McKinnon, and I am enrolling as a Non-Program student.

Student Signature

Date

Student Checklist

Prior to signing this enrollment agreement, if you are enrolling in the 500-hour Program, you must be given a catalog or brochure and a School Performance Fact Sheet, which you are encouraged to review prior to signing this agreement. These documents contain important policies and performance data for this institution. This institution is required to have you sign and date the information included in the School Performance Fact Sheet (SPFS) relating to completion rates, placement rates, license examination passage rates, and salaries and wages prior to signing this agreement.

I certify I have received the catalog, School Performance Fact Sheet, and information regarding completion rates, placement rates, license examination passage rates, and salary and wage information included in the SPFS. I have signed and dated the information provided.

Please initial: Catalog _____ SPFS _____ Course Outline _____

A copy of the Attendance Policy and Make-up Requirements is included in your enrollment packet.

Please initial here that you have received a copy of our Attendance Policy. _____

Amount due at enrollment: _____ **Total Amount due for chosen Program:** _____

Total Amount Due for current Course (Non-Program): _____

DISCLOSURE OF POTENTIAL ADVERSE SIDE EFFECTS:

Please be informed that in certain limited circumstances, massage can possibly have adverse side effects for persons with certain physical or mental conditions. The personnel at McKinnon Institute, LLC, cannot determine whether you are susceptible to possible adverse side effects. Consequently, if you have been or currently are under the care of a doctor, therapist, or medical practitioner of any kind, or if you are concerned that your participation in any class or massage activity may possibly result in an adverse side effect, it is your responsibility to contact your doctor, therapist, or medical practitioner and obtain his/her permission to participate in any class offered at the McKinnon Institute, LLC. Your enrollment in any McKinnon Institute, LLC, class constitutes your voluntary acceptance of any possible adverse side effects and your full release of McKinnon Institute, LLC, and its personnel from any liability relating thereto.

Medical History

Part of your learning in class will be related to massage contraindications. We require the following medical history information to ensure your safety when you receive massage in class.

Mark any and all of the following that apply to you, providing dates/ timeframes and other important details.

contagious skin condition _____

open sores or wounds _____

asthma _____

joint disorder or artificial joint _____

recent accident/injury _____

osteoporosis _____

current fever or swollen glands _____

epilepsy _____

cancer _____

diabetes _____

high/low blood pressure _____

varicose veins _____

Are you or could you be pregnant? _____

Do you have an IUD? _____

Do you have any allergies? _____

Do you take any medications? Please list medications, how often you take them, and what they are for :

Please list any other health concerns or issues: _____

Is there anything else we should know about you? (for example, vision or hearing impairment)

In case of emergency: Contact: _____ Phone # _____

Terms and Conditions:

Submitting your enrollment application with tuition constitutes agreement to our refund policy and admissions requirements below. Books are not included in the tuition. If you would like to purchase books, please call the office M-F (510-465-3488) to get the exact price.

Notice Concerning Transferability of Credits and Credentials Earned at McKinnon BTC

The transferability of credits (hours) you earn at McKinnon BTC is at the complete discretion of an institution to which you may seek to transfer. If the hours you earn at this institution are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all of your course work at the institution. For this reason you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending McKinnon BTC to determine if your hours will transfer.

McKinnon BTC does not accept transfer credits or credit for any experiential learning.

Student's Right to Cancel and Receive Refund:

You have the right to cancel your enrollment agreement and obtain a refund of charges paid through attendance at the first class session. You may withdraw from classes and receive a full refund less the non-refundable deposit prior to the beginning of the first class. Cancellations must be made in writing to: Selena Lee, 2940 Webster Street, Oakland, CA 94609. Refunds requested after the first day of class are pro-rated based on the class time that has elapsed.

Attendance Requirements:

All coursework at McKinnon BTC is based on hours, and it is required by the state that all hours are attended in order to receive credit. Make-up policies are based on how many hours are in the course. Tardiness is considered anything exceeding 15 minutes. All tardiness will accumulate and may result in make-up time and associated fees. Students may transfer their tuition to another course before the first day of class for a fee of \$25.

There is a maximum absence allowed of 25% of total class time for every course. Accumulated absences that exceed this amount will result in an incomplete without refund.

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to the Bureau for Private Postsecondary Education at 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833, www.bppe.ca.gov, or 888-370-7589.

A student or any member of the public may file a complaint about this institution with the Bureau for Private Postsecondary Education by calling (888) 370-7589 toll-free or by completing a complaint form, which can be obtained on the Bureau’s website www.bppe.ca.gov.

A student or any member of the public with questions that have not been satisfactorily answered by the school or who would like to file a complaint about this school may contact the California Massage Therapy Council at :One Capitol Mall, Suite 320, Sacramento, CA 95814, www.camtc.org, phone (916) 669-5337.

Attendance and/or graduation from a California Massage Therapy Council approved school does not guarantee certification by CAMTC. Applicants for certification shall meet all requirements as listed in California Business and Professions Code sections 4600 et. Seq.

I understand that this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that McKinnon BTC’s cancellation policy and refund policy have been clearly explained to me.

Name: _____ Student Signature: _____ Date: _____

Would you like a copy of this form? Yes ___ No___

McKinnon Staff: _____