



MEMBERSHIP CONTRACT

DATE:	MEMBER NAME:		
Email:			
Date of Birth:		Phone:	
Mailing Address:			
Payment Type – DEBIT CARD (Circle One) VISA MASTERCARD			
Emergency Contact Name			Phone #:
Membership Options - CIRCLE ONE			
<p>30 Min Swedish \$50 / Integrated \$60 / Deep Tissue \$70</p> <p>60 Min Swedish/Integrated \$115 / Deep Tissue \$125</p> <p>60 Min Shared Family Massage or Facial \$120 Shared Family Massage or Microdermabrasion Facial \$130</p> <p>90 Min Swedish/Integrated \$135/Deep Tissue \$145</p> <p>30 Min Infrared Treatment \$100 for 6 sessions on a 3-month contract Infrared Treatment \$150 for unlimited sessions on a 12-month contract</p> <p>Cryo Facial/Body \$200</p>			
<p>Friends and Family Discounts: Offered to our Membership holders only, you may bring an unlimited number of friends and family with you for treatments. Friends and Family will receive a \$10.00 discount per session** **Member must always be present.</p>			
<p>The Day Spa of Ojai: Visit our sister facility and get Membership prices on any treatment!</p>			
<p>I HAVE ELECTED FOR THE MEMBERSHIP TYPE:</p>			<p>MONTHLY</p>
<p>FEE:</p>			
<p>NEW MEMBER SIGNATURE:</p>			<p>DATE</p>
<p>SIGNED:</p>			
<p>By signing above, and initialing below, you agree to all the terms of this agreement.</p>			

About Your Membership: By Initialing _____ and signing above, I understand; that my membership services are non-transferable; that any unused membership money cannot be transferred to another person and must be used towards my agreed upon membership; that if my payment method declines, I will contact The Spa Central Coast within 3 days to make a payment arrangement.

Auto Renewal: By Initialing _____ and signing above, you understand that your yearly membership automatically renews, from the time you enrolled, **unless you notify us in writing.**

Policies: By Initialing _____ and signing above, I understand that The Spa Central Coast has a deposit held on each appointment and a 24-hour cancellation policy. The credit card (or payment method selected above) will act as my deposit for each appointment. Should I be unable to give 24 hours' notice for a scheduled appointment, there will be a charge for the full price of the scheduled service.

Infrared Sauna Appointments: By initialing _____ and signing above, you understand that if you fail to show up for your sauna treatment, you will be charged a \$30.00 no-show fee. To avoid this fee, you must call to cancel at least 24-hours before your appointment, no exceptions.

Cancellation Policy: By Initialing _____ and signing above, you agree that a \$100 Fee will be charged to your credit card if you cancel before your year-end, per this agreement and that if you fail to use any unused sessions during your contract period, you will not be refunded.

Credits: By Initialing _____ and signing above, I understand that it is my responsibility to check on the status of my credits. The spa does not send reminders/notifications when credits are about to expire. Credits will expire at 6 months. Expired credits will not be reinstated - NO EXCEPTIONS



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Monthly Charge Authorization and Cancellation Policy by Initialing _____ and signing above, I authorize The Spa Central Coast to charge (in the method specified) my monthly membership fee (in full), of which will be withdrawn no earlier than the 1st of the month. Further, my initials and signature acknowledge that should I cancel my membership prior to the committed time I will be subjected to a \$100 termination fee. I understand that my membership will continue past the 12-month commitment unless written notification of cancellation is given. I acknowledge that The Spa Central Coast may continue to charge my account in accordance with the terms and conditions of this agreement. Must Email with a response to thespacc@yahoo.com when looking to cancel.

Purchase Agreement: By Initialing _____ and signing above, I agree to purchase the membership and services described herein. I agree to pay for the membership and services according to the payment schedule selected above. My initials and signature above indicate my agreement to be bound by the terms, conditions, rules, and regulations of this agreement. My initials and signature further state acknowledgement of reading in its entirety this Spa Central Coast Membership Contract before signing it. Significant others are not authorized to ask about or cancel your membership. All Business is conducted by the person who signs the agreement. Your membership will continue to charge during any forced closures, however there will be no expiration on the charges until a reopen begins.

Memberships that are paying \$135 or more can do a couples massage without additional fee.

Membership appointments are to be booked Monday through Friday. We are open late on Tuesday & Friday evenings.

For every credit/debit card decline, there will be a \$5.00 charge.

If you choose to terminate your membership before you are caught up on your credits in your account and your membership had different pricing than our updated memberships, you will have to pay the different in price when using those credits.

Spa CC Staff Signature:	Processed (circle): YES NO
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Updated/Revised: 11/17/23