

KIA-ORA WELLNESS, LLC NON-CONTRACT MEMBERSHIP AGREEMENT

1. Exclusive Diamond (12 Months): Unlimited 30 minutes Capsule Use (\$5000.00/year)
2. Gold (1 month): Six, 30 minutes Capsule use (\$299.00 per month)
3. Silver (1 month): Four, 30 minutes Capsule use (\$249.00 per month)
4. Bronze (1 month): Two, 30 minutes Capsule use (\$149.00 per month)

Start Date: \_\_\_\_\_

Customer Information: Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Email Address (required) \_\_\_\_\_

Phone: \_\_\_\_\_

PAYMENT AUTHORIZATION: I hereby agree to make payments and authorize Kia-Ora Wellness, LLC to charge my credit card account below for the Monthly Membership amount of \$ \_\_\_\_\_, debited by Kia-Ora Wellness, LLC on the monthly anniversary of my membership.

MasterCard: \_\_\_\_\_ VISA: \_\_\_\_\_ AM Express: \_\_\_\_\_ Other: \_\_\_\_\_

Credit Card Account No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

First debit will be on \_\_\_\_\_.

TERMS AND CONDITIONS: I am 18 years of age or older. I agree the payment authorization will remain in effect until I cancel my Membership. If my Credit Card is declined, my Membership services will not be permitted until the balance is paid in full. There are no refunds for any unused sessions or membership months. An online or phone call appointment is advised before every session. An online cancellation or phone call notice is also required 24- hours before my appointment for all cancelled appointments. If I cancel my appointment after the 24- hour time frame or fail to show up for my appointment, I may be subject to the full charge of the appointment.

I HAVE READ AND AGREE TO THIS MEMBERSHIP AGREEMENT.

Member's Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Member's Signature: \_\_\_\_\_

Kia-Ora Wellness, LLC Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_