

Legal Name: Relational Touch Inc Operating Name: Body Intelligence Correspondance Address: #538-1771 Robson St Vancouver BC V6G 3B7 Email: training@bodyintelligence.com website: www.bodyintelligence.com	PTIB Registration Number: 3524
	This institution is PTIB Accredited: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

STUDENT INFORMATION

Student Last Name		Student First Name and Middle Name	
Student Usual First Name		Student Personal Education Number	
Student Previous Last Name (if applicable)		Student Previous First Name (if applicable)	
Student BC Mailing Address		Postal Code	
Student Permanent Mailing Address (including country) (if different from above)		Postal Code	
Student Telephone Number	Alternative Telephone Number	Student Main Email Address	
International Student:	Yes	No	

Date of Birth:					Gender			
	Y	Y	Y	Y	M	M	D	D

PROGRAM INFORMATION

Program Name (as registered with PTIB): BiodynamicCraniosacral Training			
Program Duration in Hours: 350	Program Duration in Weeks (or portion thereof) n/a	Program Start Date: Sample	Program End Date sample

Credential Issued on Graduation	Diploma	<input type="checkbox"/>	x Certificate
Program Delivery Method (select all that apply)	<input checked="" type="checkbox"/> On-Site	Distance	On-line
Language of Instruction	English		

PRIVACY

Under the Personal Information Protection Act students are entitled to access their student file. The personal information collected will only be used for the purpose for which it was originally collected or for a use consistent with that purpose, unless the student consents to other use.

PROGRAM ADMISSION REQUIREMENTS

- Attend an [Introductory Seminar](#). Or receive at least 1 session from a qualified therapist if possible.
- Attend an interview with the local tutor of Body Intelligence either in person or by Skype or telephone. *It is important that we have a sense of you and your goals before the training starts, to determine if this is the right training for you.*

Having previous training and experience as a health care practitioner or therapist can be helpful but is not required. Note that in order to practice professionally after graduation, you are responsible for having a license to touch (e.g. massage license), if required in your area.

(Program admission requirements may not be waived by the student or the institution)

PROGRAM COSTS

Plan A	Amount
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Program Costs in Canadian Dollars (\$CDN):

- | | |
|---|-------------------|
| • Tuition(this amount includes discounts or scholarship amounts) | \$10,000 |
| • Registration/Application Fee (<i>maximum \$250 for domestic students or \$1,000 for international students</i>) | \$0 |
| • Prior Learning or Portfolio Assessment Fee (if applicable) | \$0 |
| • Textbooks | \$0 not mandatory |
| • Computer/Tablet | \$n/a |

• Supplies/Materials	\$n/a
• Lab Fees	\$n/a
• Uniforms	\$n/a
Other (please specify):	\$
Other (please specify):	\$
Total Program Cost for Plan A	\$10,000
Plan B Yearly Payments: one month prior to Module 1 \$1000	Total Program Cost
one month prior to Module 2: \$4250;	Plan B
one month prior to Module 6 \$4250. (5% discount, this is year two payment).	\$9500

PAYMENT PLAN		
<i>(All terms and conditions of payment must be included here, including discounts, bursaries and deferred payment arrangements and all charges for late/insufficient payment)</i>		
Program Costs will be paid by way of:		
Cheque, e transfer or paypal		
Payment Amount(s)	Date(s) Due:	With application and then
Plan A:Module Payments \$1000		One month prior to each module
Plan B Yearly	Module 1 pay in full. Pay the remaining \$8500- a 5% discount for next 9 modules in two payments: One month prior to M2: Pay \$4250. One month prior to M6: Pay \$4250 (second year)	
REFUND POLICY		

1. If Body Intelligence receives tuition from the student, or a person on behalf of the student, the institution will refund the student, or the person who paid on behalf of the student, the tuition that was paid in relation to the Biodynamic Craniosacral Training in which the student is enrolled if:
 - a. the institution receives a notice of withdrawal from the student no later than seven days after the effective contract date and before the contract start date;
 - b. the student, or the student's parent or legal guardian, signs the student enrolment contract seven days or less before the contract start date and the institution receives a notice of withdrawal from the student between the date the student, or the student's parent or legal guardian, signed the student enrolment contract and the contract start date; or
 - c. the student does not attend a work experience component and the institution does not provide all of the hours of instruction of the work experience component within 30 days of the contract end date.
2. Body Intelligence will refund the tuition for the Biodynamic Craniosacral Training and all related fees paid by the student or a person on behalf of the student enrolled in the program if the student is enrolled in the program without having met the admission requirements and did not misrepresent his or her knowledge or skills when applying for admission.
3. If a student does not attend any of the first 30% of the hours of instruction to be provided during the contract term, Body Intelligence may retain up to 50% of the tuition paid under the student enrolment contract unless the program is provided solely through distance education.
4. Unless the Biodynamic Craniosacral Training is provided solely through distance education, if Body Intelligence receives a notice of withdrawal from a student:
 - a. more than seven days after the effective contract date and
 - i. at least 30 days before the contract start date, the institution may retain up to 10% of the tuition due under the student enrolment contract, to a maximum of \$1,000.
 - ii. less than 30 days before the contract start date, the institution may retain up to 20% of the tuition due under the student enrolment contract, to a maximum of \$1,300.
 - b. after the contract start date
 - i. and up to and including 10% of the hours of instruction to be provided during the contract term have been provided, the institution may

Private Training Institutions Branch (PTIB) of the Ministry of Advanced Education, Skills & Training of BC

Please be advised that under section 61 of the Private Training Act, the Registrar is authorized to collect, use and disclose personal information in accordance with the Registrar's regulatory duties under that Act. Accordingly, this institution is authorized to disclose your personal information to the Registrar for regulatory purposes.

For further information about PTIB and the services it provides, students may contact PTIB at:

203 - 1155 West Pender Street, Vancouver, BC, V6E 2P4
Tel. (604) 569-0033 or 1-800-661-7441
Fax. (778) 945-0606
<https://www.privatetraininginstitutions.gov.bc.ca>
info@privatetraininginstitutions.gov.bc.ca

STUDENT DECLARATION

I consent to the Institution sharing my personal information with the Ministry of Advanced Education, Skills and Training for research purposes and statistical analysis under the authority of sections 6(2)(a) and 10(1)(a) of the Personal Information Protection Act (PIPA).

I consent to the sharing, in accordance with Provincial privacy legislation, of my enrolment and reporting information between Body Intelligence and Immigration, Refugees and Citizenship Canada, as necessary, for the purposes of the International Student Program.

Should you have any questions about the collection, disclosure and use of personal information you may contact: Director, Regulation, Private Training Institutions Branch, Governance, Legislation and Strategic Policy Division, Ministry of Advanced Education, Skills and Training 203 - 1155 W. Pender St, Vancouver, BC V6E 2P4 or by telephone at (604 569-0019).

Student Signature

Date Signed

INSTITUTION DECLARATION

The institution agrees to deliver the program according to the terms of this contract. The institution certifies that the student has met the admission requirements for the program of study.

Printed Name of Institution Representative

Position Title

Gerard Sumner

Director, SEA

Signature of Institution Representative

Date Signed