

SCHOOL OF
HEALING ARTS
AT
The Estuary

1711 19TH AVENUE SOUTH
NASHVILLE, TN 37212

To register for any programs with The School of Healing Arts, please complete this form

STUDENT APPLICATION/ANNUAL AGREEMENT

(To be completed by new students and all returning students before the start of classes each year)

PLEASE PRINT

Today's Date _____

Name of Class _____ Class Year _____

Student Name _____ Birthdate _____

Address _____

City/State _____ Zip _____

Home Phone _____ Work Phone _____

Email (required) _____ Cell Phone _____

Occupation _____

Marital Status _____ Children _____

Present Physical Problems _____

Current Medications _____

Counseling Experience/Therapist _____

← SIGNATURE IS REQUIRED ON THE REVERSE SIDE →

THE CLASSES

Course Requirements (all classes):

- Classes
- Skills Labs (if scheduled)
- Individual therapy by an approved School of Healing Arts therapist
- Books, materials
- Homework (as assigned)

Course Electives

- Processing Groups (if offered)

STUDENT RESPONSIBILITIES AND SCHOOL POLICIES

GENERAL

- It is your responsibility to check your email regularly for school-related email.
- It is your responsibility to let the administrator know about changes in your contact information (email, address, phone).
- Do not provide feedback or advice to other students.
- Do not gossip.
- Do not “side” with other students.
- Bring food to share on school potluck days (day 2 of class).
- Teacher trainees, advanced students, and assistants may be present at your classes.

FINANCIAL

- You are required to pay your tuition, *regardless of your attendance*.
- You are required to pay the cost of individual therapy by an approved School of Healing Arts therapist at the time of each appointment.
- You are required to pay for the cost of books and extra materials.
- You are required to pay for the cost of school-provided lunches during classes.
- If you commit to joining an elective processing group, you are required to pay the fee for this processing group, *regardless of your attendance*.
- 3rd year students are required to pay a fee to help cover the costs of graduation facilities, certificates, and celebrations.
- It is your responsibility to make sure you receive your student tuition invoice each month, that your charges are correct, or to request a review of your charges. Invoices are sent via email.
- It is your responsibility to make sure your tuition payment is made on a timely basis. *A 10% late payment penalty will be added to your account each month for any charges that are past due by 60 days or more.*
- If you have a past-due tuition account after the end of each semester (December 31st; May 31st; August 31st), ***you will not be granted permission to graduate or advance to the next level of course study at The School of Healing Arts.***

ATTENDANCE

- It is your responsibility to check the class schedules on a regular basis at <http://theschoolofhealingarts.com/class-schedules> and to make sure that you have them on your personal calendar.
- It is your responsibility to be on time for classes and not leave early. *If this is unavoidable, please make arrangements with the instructor prior to class to ensure that group instruction will not be adversely affected.*
- It is your responsibility to inform instructors with as much advance notice as possible if you are going to be absent from classes, skills labs, or processing groups.
- It is your responsibility to schedule your monthly appointments with your therapist and to keep them.
- Acceptable attendance is a requirement of graduation.

RESCHEDULING CLASSES

Classes needing to be rescheduled due to circumstances beyond the School’s control (illness, personal tragedy, inclement weather, etc.) will be rescheduled at the discretion of the School. This rescheduling will not affect the student’s financial obligation.

HOMEWORK

- It is your responsibility to complete required homework as assigned on a timely basis.
- It is your responsibility to keep copies of all homework you submit and to ensure that all submitted homework has been received by The School of Healing Arts.
- If you have missing homework assignments after the end of each semester (December 31st, May 31st, August 31st), ***you will not be granted permission to graduate or advance to the next level of course study at The School of Healing Arts.***

CONFIDENTIALITY

- Confidentiality is vital to the safety of all students.
- You are prohibited from revealing the identity of or repeating details about information shared by other participants in the program.
- This confidentiality policy applies also to any trainees, advanced students, and/or assistants attending your class.

ROMANTIC AND SEXUAL RELATIONSHIPS

- Each class and group is encouraged to process many feelings and enjoy the safety of expressing vulnerability without the risk of being approached romantically.
- For the safety of all students, romantic and sexual involvement is prohibited until both parties have had ***no involvement*** with the SHA for at least 2 years.
- Couples committed before enrollment in The School of Healing Arts are exempt from this requirement.

ALCOHOL AND DRUG POLICY

- All students are encouraged to be drug, alcohol, and cigarette-smoking free since these interfere with ones’ ability to hold and process energy.
- Students ***must*** be free from illicit drugs.

STUDENT AGREEMENT

- *I understand that the classes offered at The School of Healing Arts are therapeutic in nature and are designed to bring forth physical, emotional and spiritual issues that will need to be processed with a qualified psychotherapist and medical professional.*
- *If I am unable to participate in any part of a class, I will inform the person leading the program at once.*
- *I represent that I am physically and emotionally stable, have not been hospitalized within the past 5 years for a mental disorder, and that I will comply with my own physicians’ and other health care professionals’ recommendations concerning my physical and emotional health.*
- *I understand that The School reserves the right to determine my ability to participate at any stage of the process and that I may be asked to leave the program without refund of fees.*
- *I understand that once I begin each class, I am financially responsible for entire year regardless of my ability to attend.*
- *I hereby assume for myself, heirs, executors, administrators and assigns, all risk of physical and emotional injury which may occur during or after the Program and I agree to release and hold The School of Healing Arts, its employees and agents harmless from any liability, loss, cost or damage arising out of my participation in the School.*
- *I certify that I am 21 years of age or older.*

Signature (required) _____ **Date** _____

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STUDENTS: PLEASE KEEP THIS FOR YOUR RECORDS