Central Oahu Massage Institute
94-916 Waipahu Street, Suite B
Waipahu, Hawaii 96797
Phone: (808) 688-1808
E-mail: info@centraloahumassageinstitute.com
Website: www.centraloahumassageinstitute.com

STUDENT APPLICATION

STUDENT INFORMATION & BACKGROUND

First & Last Name		Birthdate (mm/dd/yy)	
Street Address			
City, State & Zip			
Phone Number		Email	
Your reason to become a Massage Therapist?			
How did you hear about COMI?			
High School Attended?		Highest Level Schooling?	
Start Date?		Gender?	☐ male ☐ female
Emergency Contact?		Phone	

REQUIREMENTS, POLICIES & PROCEDURES

Must be 18 years old. Bring notebook and pen. All textbooks and equipment provided. It is your responsibility to adhere to all rules, regulations, policies, procedures, clinical operations and internship requirements.

REFUND POLICY

50% refund given up to 50 hours of instruction or less.

ACKNOWLEDGEMENT

As a student of Central Oahu Massage Institute (COMI) and Knead Professional Massage (KPM), I fully understand and accept academic, attendance and financial responsibilities and attest that all questions have been answered truthfully and accurately. Submittal of this document does not guarantee placement and must be approved. Spaces are limited. COMI and KPM reserve the right to change or modify requirements, regulations, policies, and procedures at any time without prior notice. A 5% financing fee and an additional 3% credit card processing fee will apply, plus applicable state taxes.

Student's Signature		Date	

PAYMENT DATE	PAYMENT AMOUNT	PAYMENT TYPE	BALANCE
	$	☐ CASH ☐ CHECK #_____ ☐ CREDIT CARD	$
	$	☐ CASH ☐ CHECK #_____ ☐ CREDIT CARD	$
	$	☐ CASH ☐ CHECK #_____ ☐ CREDIT CARD	$
	$	☐ CASH ☐ CHECK #_____ ☐ CREDIT CARD	$