







# Bronx Wellness Acupuncture & Massage, P.C.

Center of Holistic Medicine

2510 Westchester Ave., Ste 110, Bronx, NY, 10461

(718) 684-3050 ~ www.bronxwellness.com

A WELLNESS PROGRAM THAT'S RIGHT FOR YOU			
 <p><b>Acupuncture membership</b></p> <p><b>\$59*</b></p>	 <p><b>Massage membership</b></p> <p><b>\$64*</b></p>	 <p><b>Massage membership +</b></p> <p><b>\$86*</b></p>	 <p><b>AcuMassage Combo membership</b></p> <p><b>\$119*</b></p>
<p><b>You get:</b></p> <ul style="list-style-type: none"> <li>• One acupuncture session per month (a.k.a. an "acupuncture benefit")</li> <li>• If you don't use the benefit, it carries over to the following month</li> <li>• All additional acupuncture sessions during same billing cycle are at "<b>member rate</b>" of \$55 (reg. \$65)</li> <li>• Unlimited gift certificate sales at "<b>member rate</b>"</li> <li>• 10% off wellness</li> <li>• 10% off herbal products</li> <li>• FREE upgrades (for cupping, moxibustion, gua sha)</li> <li>• FREE Sharing of benefits with up to 5 people (they pay the member rate instead of regular rate)</li> </ul>	<p><b>You get:</b></p> <ul style="list-style-type: none"> <li>• One 60 minute massage per month (a.k.a. a "massage benefit")</li> <li>• If you don't use the benefit, it carries over to the following month</li> <li>• All additional massages during same billing cycle are at a "<b>member rates</b>" shown below               <ul style="list-style-type: none"> <li>○ 30 min - \$40 (reg. \$45)</li> <li>○ 60 min - \$60 (reg. \$80)</li> <li>○ 90 min - \$80 (reg. \$105)</li> </ul> </li> <li>• Unlimited gift certificate sales at "<b>member rate</b>"</li> <li>• 10% off wellness products</li> <li>• Discounted premium upgrades (i.e. hot stones, deep tissue, thai, etc.)</li> <li>• FREE Sharing of benefits with up to 5 people (they pay the member rate)</li> </ul>	<p><b>You get:</b></p> <ul style="list-style-type: none"> <li>• One 90 minute massage per month (a.k.a. a "massage benefit")</li> <li>• If you don't use the benefit, it carries over to the following month</li> <li>• All additional massages during same billing cycle are at a "<b>member rates</b>" shown below               <ul style="list-style-type: none"> <li>○ 30 min - \$40 (reg. \$45)</li> <li>○ 60 min - \$60 (reg. \$80)</li> <li>○ 90 min - \$80 (reg. \$105)</li> </ul> </li> <li>• Unlimited gift certificate sales at "<b>member rate</b>"</li> <li>• 10% off wellness products</li> <li>• Discounted premium upgrades (i.e. hot stones, deep tissue, thai, etc.)</li> <li>• FREE Sharing of benefits with up to 5 people (they pay the member rate)</li> </ul>	<p><b>You get:</b></p> <ul style="list-style-type: none"> <li>• One 60-minute massage <b>AND</b> one acupuncture treatment</li> <li>• If you don't use the benefits, they carry over to the following month</li> <li>• All additional massages during same billing cycle are at a "<b>member rates</b>" shown below               <ul style="list-style-type: none"> <li>○ 30 min - \$40 (reg. \$45)</li> <li>○ 60 min - \$60 (reg. \$80)</li> <li>○ 90 min - \$80 (reg. \$105)</li> </ul> </li> <li>• Additional acupuncture treatments during same billing cycle are at "<b>member rate</b>" of \$55 (reg. \$65)</li> <li>• Unlimited gift certificate sales at "<b>member rate</b>"</li> <li>• 10% off <b>all</b> products</li> <li>• Discounted upgrades</li> <li>• FREE Sharing of benefits with up to 5 people (they pay the member rate)</li> </ul>
<p><b>Why? Because it represents a commitment to your health! Also, it is a WIN-WIN as it gives you a great discount and allows us to fulfill our commitment to helping you achieve optimal well-being</b></p>			
<p><b>* Fine Print – READ THIS TOO:</b></p> <ul style="list-style-type: none"> <li>- There is no setup fee but ALL memberships require a six month commitment. Canceling before the 6 months will incur a penalty equivalent to ONE (1) month's FEE (i.e. \$59 / \$64 / \$86 / \$119)</li> <li>- All fees include tax but <b>not</b> the 3% convenience fee for using a credit card.</li> <li>- DEBIT CARDS SHOULD NOT BE USED for the monthly charge. IF A CHARGE IS DECLINED due to insufficient funds, a FEE of \$5 will be added to your balance.</li> <li>- Additional sessions during the same billing cycle can be paid in cash to avoid convenience fee.</li> <li>- Standard 24-hr cancellation policy still applies to all appointments made. Cancellations with less than 24 hours will be charged at the member rate if a benefit is not available.</li> </ul>			



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## Wellness Membership Terms and Agreement

Wellness Membership Program Selected:

- Acupuncture Membership (\$60.77)     
  60 minute Massage Membership (\$65.92)     
  90 minute Massage Membership (\$88.58)     
  Acu Massage Combo Membership (\$122.57)

(Please Initial)

\_\_\_\_\_ I understand that the membership program is a 6-month commitment that automatically renews for my convenience.

\_\_\_\_\_ I understand that I can share my membership with up to 5 people. Please add the following names to my membership plan:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

\_\_\_\_\_ I understand that his authorization will remain in effect until I cancel in writing and I agree to notify this practice of any changes in my account information or termination of this authorization at least 7 days prior to the next billing date.

\_\_\_\_\_ I understand that the a fee for cancelling prior to the 6 months is equivalent to 1 month's membership (\_\_\_\_\_).

\_\_\_\_\_ I understand that a CREDIT CARD is required to be kept securely on file for the monthly charge and I have been advised to not use a DEBIT CARD. I understand that if I use a DEBIT CARD and the monthly charge is declined due to insufficient funds, that there will be a \$5 penalty added to my balance.

## Recurring Credit Card Authorization

I hereby authorize the Bronx Wellness to make recurring charges to my Credit Card listed below for the Wellness Membership Program selected above at the rates shown. I Agree to pay my credit card as per my credit card agreement.

Member Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
(AS SHOWN ON CARD)

Billing Address: \_\_\_\_\_  
Street City ST Zip

E-mail: \_\_\_\_\_

Credit Card Type: MC / Visa / Discover / Amex      Card #: XXXX-XXXX-XXXX-      Exp. Date: \_\_\_\_\_  
(CIRCLE ONE) (LAST 4 DIGITS ONLY)

Is this a DEBIT CARD? Yes / No  
(CIRCLE ONE)

Signature of authorized cardholder: \_\_\_\_\_ Date: \_\_\_\_\_