

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 Acupuncture AcuMassage Massage Massage membership membership Combo membership + membership \$119* \$65 *\$64** \$85* You get: You get: You get: You get: One acupuncture session One 60-minute massage One 90-minute massage One 60-minute massage per month (a.k.a. an per month per month **AND** one acupuncture (a.k.a. a "massage "acupuncture benefit") (a.k.a. a "massage treatment benefit") benefit") If you don't use the If you don't use the benefit, it carries over to If you don't use the If you don't use the benefits, they carry over the following month benefit, it carries over to benefit, it carries over to to the following month All additional the following month the following month All additional massages acupuncture sessions All additional massages All additional massages during same billing cycle during same billing cycle during same billing cycle during same billing cycle are at a "member rates" are at "member rate" of are at a "member rates" are at a "member rates" shown below \$55 (reg. \$70) shown below shown below o 30 min - \$40 (reg. \$55) Unlimited gift certificate o 30 min - \$40 (reg. \$55) o 30 min - \$40 (reg. \$55) o 60 min - \$60 (reg. \$80) sales at "member rate" o 60 min - \$60 (reg. \$80) o 60 min - \$60 (reg. \$80) o 90 min - \$80 (reg. \$115) o 90 min - \$80 (reg. \$115) o 90 min - \$80 (reg. \$115) 10% off wellness Additional acupuncture Unlimited gift certificate Unlimited gift certificate treatments during same 10% off herbal products sales at "member rate" sales at "member rate" billing cycle are at FREE upgrades (for 10% off wellness products 10% off wellness products "member rate" of \$55 cupping, moxibustion,

- gua sha)
- **FREE Sharing of benefits** and member rate with 1 additional member of the family or friend.
- Discounted premium upgrades (i.e. hot stones, deep tissue, thai, etc.)
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- FREE Sharing of benefits and member rate with 1 additional member of the family or friend.
- (reg. \$65)
- Unlimited gift certificate sales at "member rate"
- 10% off all products
- Discounted upgrades
- **FREE Sharing of benefits** and member rate with 1 additional member of the family or friend.

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

* Fine Print - READ THIS TOO:

- There is no setup fee but ALL memberships require a 6 month commitment. Canceling before the 6 months will incur a penalty equivalent to ONE (1) month's FEE (i.e. \$65 / \$64 / \$85 / \$119)
- All fees include tax but **not** the 3% convenience fee for using a credit card.
- 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.
- Additional sessions during the same billing cycle can be paid in cash to avoid convenience fee.
- Standard 24-hr cancellation policy still applies to all appointments made. Cancellations with less than 24 hours will incur a fee of \$50 for the cancellation if a benefit is not available.

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Wellness Membership Terms and Agreement					
Wellness Membership Pro	ogram Selected:				
☐ Acupuncture Membership (\$66.95	☐ 60-minute Massag Membership (\$65	•	minute Massage mbership (\$87.55)		cu Massage Combo Iembership (\$122.57)
(Prices above include all taxes and fees)					
(Please Initial)					
I understand that	the membership program is a	6-month commi	tment that automat	tically renev	ws for my convenience.
I understand that membership plan:	I can share my membership w	vith up to 1 addit	ional person. Pleas	e add the fo	ollowing names to my
· · · · · · · · · · · · · · · · · · ·	his authorization will remain unt information or termination		_	_	
I understand that the 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 (CIRCLE ONE)	Card #:		<u>-</u>	Exp. Date:
Is this a DEBIT CARD?	Yes / No (CIRCLE ONE)				
Signature of authorized	l cardholder:				Date: