

Client Name: _____

Mailing address: _____

City _____ State _____ Zip _____

Cell Phone number: _____

Home Phone Number (if applicable): _____

E-mail address: _____

This is an agreement between the Client listed above and Pilates Works, LLC.

Purchase Agreement for Extended Payment Plan for "Commitment" packages

(Note: Client is limited to 1 highly discounted "Commitment" Package within any category of tuition during the same calendar year, e.g. Flex Credits vs. Privates, etc.)

I, _____ (Client), as a client of Pilates Works, LLC, agree to an extended payment plan for the following package(s):

Name/contents of package	Price	Expiration Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Tuition Amount Due: \$ _____

I agree to provide a valid credit card number to be held on file in the Tula system, so that payments can be charged according to the payment plan checked/initialed below:

_____ **Two equal payments:** A down payment of \$ _____ (50% of the total amount due) at the time this agreement is executed and the remaining \$ _____ (50% of the total amount due) **plus a \$5 service fee** to be charged on or after _____ (date)

_____ **3 payments:** A down payment of \$ _____ (40% of the total amount due) at the time this agreement is executed and the remaining 60% to be divided into 2 additional payments of \$ _____ (30% of the total amount due) **plus a \$5 service fee** at the time of each payment processing on or after _____ (date) and _____ (date)

_____ **4 payments:** A down payment of \$ _____ (40% of the total amount due) at the time this agreement is executed and the remaining 60% to be divided into 3 additional payments of \$ _____ (20% of the total amount due) **plus a \$5 service fee** at the time of each payment processing on or after _____ (date) and _____ (date) and _____ (date).

I agree that if my credit card payment is not approved/fails, I will be given an opportunity to pay through an alternative method, but I must make the payment within 48 hours of notification, or I will be suspended from registering/attending more classes until the payment is made.

I understand I retain the following options:

- 1) Avoid additional \$5 service fees by remitting the remaining payments via cash or money order prior to the processing date(s) avoid additional \$5 service fees.
- 2) Pay off the remaining amount due in one lump sum to avoid future service fees (reducing the service fees to just one \$5 service fee at the time of the lump sum remainder payment).

I understand and agree that the Pilates Works policy of advance payment for all classes still applies to my participation in any group classes, personal training sessions, workshops, or any/all activities requiring tuition or admission payments. I understand if I use up the portion of the above listed packages I have purchased before the next payment date, due to the advance payment requirement, I will either need to pay by the class at single class rates until the next installment payment processes, or wait to attend classes until the next payment processes, or I must give notice in writing that I am approving the execution of an earlier installment payment date in order to be able to schedule/register/participate.

I agree this is a binding contract, that the expiration dates on the packages listed above are hard expiration dates which are non-negotiable, that the packages are non-refundable, and that it is my responsibility to use up the credits in the packages by consistently scheduling my participation in the classes/training to complete them by the expiration date.

I understand that special deadline extensions on packages may be requested in case of medical/health conditions under a doctor's written orders.

I agree that I fully understand the above terms, and will receive a duplicate of this signed agreement.

Printed Name of Client

Printed Name of Pilates Works Owner/Representative

Signature

Signature

Date

Date