



## Terms & Conditions of Membership

I hereby authorize Integrity to charge my Credit Card/Checking account for my monthly dues, which are now (\$79 for EZCOACH membership or \$29.00 for BodyBurn). All monthly Memberships are subject to a \$99 programming fee.

(If you chose a PIF (Paid in full option or Health Improvement Program.) there are NO (Zero) monthly dues).

I agree that the monthly dues are payable in advance and will be charged to my checking account/credit card on or about the 25th day of the current month for the next month's dues.

I agree to notify Integrity Health Coaching (855-550-2341) immediately of any changes or reasons that would prevent this monthly transaction from occurring and further agree to pay a \$20.00 fee each time this transaction fails for any reason. Our dues are processed by Twin Oaks Service Department.

I agree to be billed by Integrity for a minimum of 12 months starting on the 25th of the following month of when I joined. (Hereinafter referred to as the "Term").

Upon completion of the Term, my membership will continue on a month-to-month basis. Once I have completed the Term, I may cancel my membership with 30 days written notice by signing a cancellation form. Written notice received after the 15th of the month will not prevent the next billing transaction from occurring.

Failure to maintain a current membership beyond 7 days after expiration may result in payment of a new administration fee.

I may cancel this transaction in writing any time prior to midnight of the third business day after the date of this transaction.

I understand this membership is non-transferable and non-refundable. I understand that membership prices and facilities are subject to change with 30 days' notice.

I understand it is the responsibility of all members to familiarize themselves with club policies and procedures as club management reserves the right to terminate without refund a membership for inappropriate behavior or actions.

I have read and understood the entire document and agree to the terms and conditions of my membership type).

1. Every Seller of a prepaid health club services contract shall:

(a) Refund to the buyer the pro rata cost of any unused services, within 15 days after request therefore, if:

(1) The buyer is unable to receive benefits from the seller's services due to death or disability. The health club may require that the disability be confirmed by an examination of a physician agreeable to the member and the health club; provided, however, that this subparagraph shall not operate to prevent the buyer from proving the disability in a judicial proceeding; or

(2) The seller relocates his facility more than 8 miles from its present location, or the services provided by the seller are materially impaired.

(b) Refund to the buyer the pro rata cost of any unused services under all contracts between the parties within 15 days after request therefore, if the aggregate price of all contracts in force between the parties if exceeds \$1,500. Provided, however, if the contract so provides, the seller may retain a cancellation fee of not more than 25 percent of the pro rata cost of unused services on all contracts, not to exceed \$250.

(c) Refund to the buyer the pro rata cost of any unused services within 15 days after the club ceases operation.

II. Upon the occurrence of any of the circumstances enumerated in subparagraphs (a) or (b) or (c) of this section, the buyer or his estate shall be relieved of any further obligation for payment under the contract not then due and owing.

STATE LAW REQUIRES THAT THIS FACILITY REGISTER WITH THE BUREAU OF CONSUMER PROTECTION AND ANTITRUST AND MAY REQUIRE THIS CLUB POST A BOND TO PROTECT CUSTOMERS WHO PAY IN ADVANCE FOR MEMBERSHIP OR SERVICES IN THE EVENT THIS CLUB CLOSES. YOU SHOULD ASK TO SEE EVIDENCE THAT THIS CLUB HAS EITHER POSTED A BOND IN COMPLIANCE WITH THE LAW OR HAS BEEN EXEMPTED FROM THIS REQUIREMENT BY THE ATTORNEY GENERAL BEFORE YOU SIGN THIS CONTRACT. IF THIS CLUB HAS NOT POSTED SUCH A BOND, AND YOU PAY THIS HEALTH CLUB FOR MORE THAN ONE MONTH'S MEMBERSHIP OR SERVICES IN ADVANCE, THEN YOU ARE PAYING FOR FUTURE SERVICES, AND YOU MAY BE RISKING THE LOSS OF YOUR MONEY IN THE EVENT THAT THE CLUB CEASES TO CONDUCT BUSINESS.

No term contract for health club services shall be for a term of more than one year, nor shall any health club contract contain an automatic renewal clause.

I understand the risks inherent in activities such as are conducted by and/or on the property of, and/or under the direction or supervision of Integrity Health. By signing this form I agree to absolve and hold harmless Integrity Health, including but not limited to their respective managers, shareholders, officers, employees, representatives, agents, and lessees from any and all responsibility, including money damages, for any and all harms that might occur during, be caused by, or otherwise resulting any way from my use of any facility program offered by Integrity Health.

I understand that this waiver includes but is not limited to any and all: harms caused by the negligent acts of any of the above-mentioned parties, harms that would not have occurred but for my utilization of this facility and/or any offered programs or events, and harms to which such utilization was in any way a contributor.

The term "facility" shall include but not be limited to all real estate, property, chattels, programs, events and promotions owned or substantially controlled by Integrity Health, for which any or all of these entities might otherwise be liable. The term "harms" shall include but not be limited to past, present, and future physical or emotional injury, pain, or suffering; damage to property or chattels; and loss of consortium, earnings, and/or earning potential.

I further agree to inspect all facilities, programs, equipment, and personnel before attempting to use them, and to notify club management of any defects or apparent defects. I further agree to obtain knowledge of the proper use of all facilities, and to employ such knowledge at all times during my utilization of said facilities.

Please consult with your physician before starting any exercise program. Integrity is not intended as a substitute for professional medical advice, diagnosis, or treatment.

Checking off the box INDICATES THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT.