



ENT Aesthetics Membership

Terms and Conditions

Membership #1 includes your choice of chemical peel, diamond glow, customized facial, ultra-facial or lash lift & tint every month. **Membership #2** Every month a \$175 payment will be credited into your account, which you can use on any product, injectable, or service offered by ENT Aesthetics. Every dime you put into your VIP Bank account is yours to use! If you would like a service that is over your credit amount, no worries, we'll apply your banked amount and you pay the difference. ENT Aesthetics has the right to change or alter the specifications of a treatment at any time without notice. At the end of the initial term of membership (12 months), monthly fees will automatically renew.

Membership Fee: We agree to sell and you agree to purchase the membership and services described herein. You agree to have your membership payment automatically charged to your debit card on the 1st of each month. In the event that funds are not available in the buyer's account, monthly service credit will not be deposited and the membership will be placed on hold until the monthly fee is remitted in full. If the balance is not paid within 30 days from the due date, the contract will become null and void and the membership will be discontinued. To reinstate your membership, you will be charged a late fee of \$25.

Membership Discounts: Membership is non- transferrable. They are not redeemable for cash and may not be shared with other individuals. Gift cards may not be used for membership payments. All membership offers are already discounted and cannot be used in conjunction with any other promotional offer and may not be combined with any other offers or discounts.

Appointment Cancellation: A 24-hour notice is required for any changed or cancellations to your scheduled appointment. Cancellations within 24 hours' notice and same-day cancellations will be charged against your membership and the respective service for the month will be forfeited.

Unpaid Balances: If the member has an unpaid or past-due balance for previous services (including medical charges with ENT Associates, The Surgery Center or The Hearing Center) membership privileges will automatically be suspended until the balance is paid in full or payment arrangements have been agreed upon. A late fee of \$25 will be charged to your account.

Termination: ENT Aesthetics may terminate the membership if the member fails to follow the policies and procedures for the program. ENT Aesthetics has the ability to terminate the program at any time with a 30-day notice for any or no reason.

Cancellation during Initial 1-year Membership Term: Membership plans require a 12-month commitment and early termination will require a cancellation fee, equivalent to one month of the membership rate. To cancel your membership, please complete a Membership Program Cancellation Request Form a minimum of 30 days prior to the first of the month in which the member wishes the membership to be discontinued.

Modification to Terms and Commitments: ENT Aesthetics reserves the right to modify the terms and conditions at any time.



ENT Aesthetics Membership Enrollment Information

Name: _____ DOB _____
Address: _____ Apt# _____
City: _____ State _____ Zip _____
Cell Phone: _____ Home phone: _____
Email: _____

What are your main skincare concerns? (check all that apply)

- | | | | |
|---------------------------------------|------------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Aging | <input type="checkbox"/> Age spots | <input type="checkbox"/> Wrinkles | <input type="checkbox"/> Sun damage |
| <input type="checkbox"/> Acne | <input type="checkbox"/> Oily skin | <input type="checkbox"/> Dry skin | |
| <input type="checkbox"/> Other: _____ | | | |

How did you hear about the ENT Aesthetics Membership?

- | | | | |
|--|-----------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Instagram | <input type="checkbox"/> Facebook | <input type="checkbox"/> Tiktok | <input type="checkbox"/> Website |
| <input type="checkbox"/> Referred by family/friend (Name): _____ | | | |



AGREEMENT OF TERMS AND CONDITIONS

I acknowledge receiving and reading this agreement before signing. My endorsement forms a binding agreement between myself and ENT Aesthetics. By signing, I understand and agree to the above terms and conditions of the Membership Program.

Additionally, you understand and voluntarily accept any risks associated with your services and use of our facilities, except where prohibited by law.

You agree that ENT Aesthetics will not be liable for any injury including, without limitation, personal, bodily, or mental injury, economic loss, or any damage to you as a result of negligence or any other acts of anyone associated with ENT Aesthetics.

ENT Aesthetics and member each acknowledge that, except as otherwise agreed in writing, all service and information provided to or by ENT Aesthetics under this agreement is provided "as is" with no warranties or conditions whatsoever, whether expressed, implied, statutory or otherwise, and ENT Aesthetics and member each expressly disclaims any warranty of merchantability, non-infringement, and fitness for any particular purpose with respect to such service and information.

ENT Aesthetics reserves the right to terminate the Membership Plan with a thirty (30) day notice to all members. Any such notice will be sent via email, or will be posted as notification on the ENT Aesthetics website.

Patient/Guardian Signature: _____ Date: _____

Membership Program Payment Plan

- | | |
|---|------------------|
| <input type="checkbox"/> Payments for Membership | \$95 (per month) |
| <input type="checkbox"/> Year paid in full for Membership | \$1140 |

- | | |
|---|-------------------|
| <input type="checkbox"/> Payments for VIP Bank | \$175 (per month) |
| <input type="checkbox"/> Year paid in full for VIP Bank | \$2100 |