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wellness.academy@icloud.com

WELLNESS REVOLUTION TRAINING ACADEMY

REGISTRATION AGREEMENT

YEAR

- ☐ 2025
- ☐ 2026
- ☐ 2027

STUDY MODE

- ☐ Full time
- ☐ Part time
- ☐ Short Course

A. PERSONAL DETAILS

A: STUDENT PERSONAL DETAILS	
SURNAME	
FULL NAMES	
TITLE	
ID NUMBER	
DATE OF BIRTH	
GENDER	
RACE	
NATIONALITY	
RESIDENTIAL ADDRESS	
POSTAL ADDRESS	
EMAIL-ADDRESS	
CELLULAR NO	

B: PARENT/GUARDIAN DETAILS			
SURNAME			
FULL NAMES		TITLE	
ID NUMBER		DATE OF BIRTH	
RESIDENTIAL ADDRESS			
POSTAL ADDRESS			
EMAIL-ADDRESS		CELLULAR NO	

PERSON RESPONSIBLE FOR THE ACCOUNT							
Mother		Father		Guardian		Self	
SURNAME AND FULL NAMES							
ID NUMBER							
EMAIL-ADDRESS				CELLULAR NO			
EMPLOYER				OCCUPATION			

INITIAL_____

B. PROGRAMME SELECTION

PROGRAMME NAME			
SAQA ID & QUALIFICATION NAME			
NQF LEVEL		INTAKE	
DURATION			
FULL TIME			
PART TIME			

C. FINANCE SECTION

PAYMENT PLAN SELECTION	
CASH PRICE	
TERMS PRICE (includes 10% Admin Surcharge)	
STUDENT LOAN	
NON-REFUNDABLE ADMISSION FEE	
NON-REFUNDABLE REGISTRATION FEE	
TOTAL DUE ON REGISTRATION (Payable on registration to create student number and provisional registration letter)	
FULL PROGRAMME FEE (CASH PRICE)	
FULL PROGRAMME FEE (TERMS PRICE)	
DEPOSIT PAYABLE	
INSTALMENT TERM SELECTED	

I/WE acknowledge that we have received the pro-forma quotation for the program selected and by signing this agreement, agree to the financial terms and my payment obligations as stipulated herein.

FULL NAMES OF PARENT/SPONSOR/GAURDIAN OR STUDENT, responsible for the account:

_____

Signature_____ Date _____ INITIAL_____

D. TERMS AND CONDITIONS

GENERAL

1. This document is a contract between the student, the co-signatory (parent/guardian in the case where the student is a minor), and Wellness Revolution Training Academy.

2. In the event that the student is a minor, this document must be co-signed by the student's parent/ guardian, who will be deemed to have assisted the minor in entering into the agreement and shall be jointly and severally liable with the student and payment of the fees.

3. In the event that a sponsor assumes the liability for the student's fee, the sponsor shall be a third party to this agreement in his/her/its own capacity, with the obligation to pay the fees jointly and severally with the student, where the student is not a minor on the date of signature. The sponsor shall be held solely liable for the fees in the event that the student is a minor on the date of signature.

4. If the choice of campus is not selected for the student to later specify his/her choice of campus, it shall be deemed that the student is contracted with the campus that has received his/her registration fee.

5. The student is held liable to pay the registration fee to secure his/her placement in the course and this registration fee is non-refundable.

6. The student will be held responsible to inform the institution of any changes that need to be made regarding their contact information, banking information or any other personal information.

WELLNESS REVOLUTION TRAINING ACADEMY RIGHTS AND OBLIGATIONS

1. Wellness Revolution Training Academy will offer a facilitator-led full-time programme including theoretical classes, practical classes and work integrated learning programmes (subject to registration of this mode).

2. Wellness Revolution Training Academy will offer an online blended programme which includes a full-time online tutor to assist and guide the student through their course, with support workshops that are scheduled over three cycles throughout the year.

3. Wellness Revolution Training Academy will offer short course contact (CPD) and short course online courses which includes online assistance, online resources and access to the online learning platform- for all online/distance registered students.

4. The parties acknowledge that Wellness Revolution Training Academy provides facilitator-led tuition for contact registered programmes and, therefore:
   - In the event of a facilitator's resignation, sickness, or temporary indisposition, classes may become disrupted and be rescheduled and it is Wellness Revolution Training Academy's obligation to resume instruction as soon as possible.
   - In the event of a permanent indisposition of the facilitator, Wellness Revolution Training Academy shall, within reasonable time constraints, once the permanent illness has been confirmed, engage the services of a substitute facilitator.

5. Provisional timetables for the year shall be made available to the student at the time of the commencement of the student's programmes. Wellness Revolution Training Academy reserves the right at any time, to alter the timetables, with adequate notice being given to the student, where reasonably possible. The student should make no other commitments before receiving the schedule.

INITIAL_____

6. Wellness Revolution Training Academy shall be entitled to deny a **student** access to classes and withhold examination results, certificates, deny access to its facilities and premises, **student** participation in **student** activities in the event of a breach of this **agreement with regards to outstanding or arrears fees.**

7. First Aid Courses, testing equipment, kits, international examination fees and other resources are additional resources required for the programs and are charged at an additional fee.

8. Whole agreement and non-variation
   a. This **Agreement** is the whole agreement between the **Parties**, who/which acknowledge that they have not been induced to enter into this **Agreement** by any representations or warranties, other than those set out or contained herein.

   b. No representations or warranties shall be of any force or effect unless reduced to writing and contained herein.

   c. No alteration, amendment, variation or consensual termination of this **Agreement** shall be of any force or effect unless reduced to writing and signed by each of the **Parties**.

9. Good Faith
   a. The **Parties** enter into this **Agreement** on the basis of trust and record that they will observe good faith in contracting and dealing with each other and implementing the provisions hereof. This implies, amongst other things, that:

   b. the **Parties** will at all times during the currency of the **Agreement** act reasonably and in good faith; and

   c. the **Parties** will perform their obligations arising from this **Agreement** diligently and with reasonable care.

10. Waiver
    No waiver of any of the terms and conditions of this **Agreement** will be binding for any purpose unless expressed in writing and signed by the **Party** giving the same, and any such waiver will be effective only in the specific instance and for the purpose given. No failure or delay on the part of either **Party** in exercising any right, power or privilege will operate as a waiver, nor will any single or partial exercise of any right, power or privilege preclude any other or further exercise thereof or the exercise of any other right, power or privilege.

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POPI ACT POLICY

Wellness Revolution Training Academy is an accredited education institution, and to certify you, we will need to provide our accrediting bodies with your personal information to ensure certification and your profile is loaded on the National Learner Record Database (NLRD) so you may receive your qualification.

As per the POPI Act (protection of personal data), Wellness Revolution Training Academy acknowledges that student information is private and confidential. However, disclosure of personal information to Wellness Revolution Training Academy related academic accreditation bodies, CATHSSETA / QCTO / SERVICES SETA / ITEC / SAASHP / REPSA is required to ensure verification of the student's results and certification.

The student agrees that Wellness Revolution Training Academy may disclose his/her details to the accrediting bodies mentioned above for review, verification and certification purposes.

Additionally, the student's parents/sponsors (where applicable), may receive results and feedback from Wellness Revolution Training Academy as and when required.

I_____(full names and surname of student), on this _____day

of _____acknowledges and understand the above in relation to the POPI Act:

_____(Signature)

INITIAL_____

EXTENSION POLICY

An extension is applicable to students who have not completed their course work by the end of their course duration as stipulated in the academic policy of the program.

An extension is granted to students who have completed 50% or more of their course.
The maximum number of months a student can extend for is six months. Failure to complete within the six months period will result in a re-registration.

The extension will be valid once payment has been received.

The extension fee is **R850.00** per month, the maximum is R5 100 for six months extension.

RE-REGISTRATION POLICY AND ADITIONAL FEES

This policy is applicable for all students that have NOT completed 50% or more of their course work as stipulated in the academic policy of the program, and has reached the expiration date of the course.
You will be required to re-register and **full payment** of the course will be required.

2025 EXTENSION AND EXAM RE-WRITE FEES	
Full-time	
Extension	R850
Theory Exam Re-write	R650
Oral Exam	R650
Practical Exam Re-write	R1 500
Part-time	
Extension	R850
Theory Exam Re-write	R650
Oral Exam	R650
Practical Exam Re-write	R1 500
Online	
Extension	R850
Theory Exam Re-write	R650
Oral Exam	R650
Practical Exam Re-write	R1 500
Short Courses	
Extension	R550
Theory Exam Re-write	R550
Practical Exam Re-write	R850

Additional Fees:

Please take note that students for National Certificate in Fitness, Personal Training & National Certificate Beauty Specialist need to purchase additional equipment, kits & First Aid course:

INITIAL_____

E. CANCELATION POLICY (NO EXEPTIONS WILL BE MADE FOR THIS POLICY)

- The programme fee includes a non-refundable registration fee of R2000 (two thousand rand).
- There is a five-day cooling-off period from the date of registration for the course during which time the Student/Parent/Guardian/Account Payer may inform Wellness Revolution Training Academy in writing that he/she wishes to cancel the registration. If this contract is cancelled during the cooling off period any tuition fees paid for this course, including the deposit but excluding the non-refundable deposit, will be refunded.
- After the cooling-off period no amendments or alterations to this contract shall be permitted and no refunds will be given.
- Students failing to attend lectures, for whatever reason, are not entitled to a refund or a reduction in course fees and are not absolved or exempt from any course fees due.
- Students/Account Payer not adhering to the conditions of registration in terms of payment of their fees will be handed over for debt collection.
- Study notes are subject to normal copyright restrictions and there will be no refund for material returned.
- Course fees do not include the First Aid course and practical assessment pack. The First Aid course can be done through Wellness Revolution Training Academy's affiliate partner or any other registered external provider. The practical assessment pack and training kits can be purchased from Wellness Revolution Training Academy or external supplier.
- Should the Student be in breach of any obligations, despite fourteen days written notice, Wellness Revolution Training Academy shall be entitled to cancel this contract without further notice and without prejudice to any further claim. The Applicant shall not be entitled to refunds for any payments made.
- Cancellation requests should be submitted in writing stipulating the reasons in detail and be accompanied by supporting documents. All cancellations will be reviewed, and the outcome will be confirmed in writing.
- In the event of the Student/Account Payer cancelling their Agreement, the Student/Account Payer will be refunded the stipulated monies after a period of thirty days, from receipt of the completed refund application form.

ADDITIONAL SHORT COURSES CANCELLATION POLICY:

- Wellness Revolution Training Academy reserves the right to postpone/cancel a course should a minimum number of registrations not be achieved. If cancelled by Wellness Revolution Training Academy, the course fee will be refunded.
- The registration fee or holding deposit applies specifically to the course as stated on this registration form and is non-refundable unless the course are cancelled by Wellness Revolution Training Academy.
- No refunds are considered after course commencement date.

I _____ have read and understood the Wellness Revolution

Training Academy Cancellation policy.

Signature _____ Date: _____

INITIAL_____

(Parent/ Legal guardian to sign should the student be younger than 18 years old)

I _____have read and understood the Wellness Revolution Training Academy Cancellation policy.

Signature:_____ Date: _____

INITIAL _____

F. TRANSFERRING/POSTPONEMENT OF COURSE

1. In order to postpone your studies, the full registration fee must be paid (due to class limitations). The Student has two weeks from date of registration to change their preferred intake.
2. If a Student postpones his or her studies after two weeks from the date of registration, the student will have to cancel the registration for the current intake and reapply & reregister for the preferred intake.
3. A (non-refundable) reregistration fee is payable.
4. The (non-refundable) registration fee paid prior to cancellation will be reserved and credited towards the Student's new intake account.
5. The funds are to be utilized within one year.
6. Should the Student cancel an intake & not re-register within the period of a year for the following intake, the Student will forfeit the funds.

I, the undersigned Student, and/or his/her Co-signatory declare that I have read and understand the transferring/postponement terms and conditions.

I _____ have read and understood the Wellness Revolution Training

Academy Transfer/Postponement policy.

Signature:_____ Date: _____

(Parent/ Legal guardian to sign should the student be younger than 18 years old)

I _____ have read and understood the Wellness Revolution Training

Academy Transfer/Postponement policy.

Signature:_____ Date: _____

FOR AND OF BEHALF OF PRINCIPAL DEBTOR:

Signed on this _____ day of _____ 20____

by placing your name in the above block, you confirm that this is your electronic signature, and that this information is true and legally applicable.

_____ _____

FULL NAMES OF PRINCIPAL DEBTOR SIGNATURE OF PRINCIPAL DEBTOR

_____ _____

FULL NAMES OF STUDENT SIGNATURE OF STUDENT

FOR AND OF BEHALF OF WELLNESS REVOLUTION TRAINING ACADEMY:

_____ _____

FULL NAMES OF DULY AUTHORISED PERSON SIGNATURE OF DULY AUTHORISED PERSON

_____ _____

FULL NAMES OF CAREER GUIDANCE CONSULTANT SIGNATURE OF CAREER GUIDANCE CONSULTANT