



Skin MD Dermatology and Skin Enhancement Center
640 Southpointe Court Suite 110 Colorado Springs, CO 80906
Phone: 719-228-9488 Fax: 719-424-4859
info@skinmdcolorado.com

VIP Membership Agreement

Name: _____ Address: _____
 Date of Birth: _____
 Email: _____ Phone: _____

I, _____, ("Client"), elect to enter this membership agreement with SkinMD Dermatology and Skin Enhancement Center.

Membership Package includes:

- \$119.00 per month
- Choice of treatment combinations each month.
 - a. Dermaplane and chemical peel
 - b. Dermaplane and facial
 - c. Dermaplane or microderm and brow wax and/or tint
 - d. Microdermabrasion or dermaplane and LED light therapy
 - e. Chemical peel and brow wax and/or tint (excludes VI, TCA and/or other specialty peels)

- 15% off all products
- 10% off services Clear + Brilliant®, Pellevé™, IPL, microneedling, and PRP (platelet-rich plasma)
- 10% off injectables

Substitutions and/or trades are prohibited. The following services/products are excluded: CO2 laser, MonaLisa Touch®, Fraxel®, CoolSculpting®, Thermage®, and Sculptra®.

Payments due under membership agreement: Payment will be processed on the 3rd business day of each month of membership. I hereby authorize my bank credit card lender to make payments from my debit and/or credit card account on preauthorized charges drawn by Elizabeth Piantanida MD, PC dba SkinMD Dermatology and Skin Enhancement Center and charge them to my account. I further acknowledge my payment obligations as set forth in this membership agreement. I, by my signature below, confirm my acceptance of all conditions herein. All payments due hereunder will be collected by Electronic Funds Transfer ("EFT") via valid debit or credit card which Client shall keep on securely on file. I acknowledge that payments will process on the third (3rd) business day of each month and it is my responsibility to maintain valid and current card / payment information to the clinic. *I agree that my failure to maintain valid and current card / payment information will constitute a default of this Membership Agreement.*

Terms of Membership and Automatic Renewal: The Membership Term for this Membership Agreement is Twelve (12) months, beginning the first day of the first month following the date on which this Membership Agreement is signed by the Client. Unless otherwise cancelled in accordance with the terms of this Membership Agreement. **This membership agreement will automatically renew on a month-to-month basis at the conclusion of the 12-month membership term.** If you do not wish for this membership agreement to automatically renew, you must provide written notice of cancellation no less than thirty (30) days prior to end of the then-current Membership Term. All services must be scheduled and received in the calendar month/Contract Term. All memberships renew at the sole discretion of Skin MD Dermatology, and if for any reason this agreement is cancelled by Skin MD Dermatology, a full refund will be issued on a prorated basis.

Cancellation (more than 3 days after signing): This Membership Agreement may be cancelled by Client at any time, by providing written notice of cancellation no less than 30 days prior to the desired cancellation date. No refunds shall be due for any service available or rendered prior to written date of notice of cancellation from Client. If you do not wish for this Membership Agreement to automatically renew, you must provide written notice of cancellation no less than thirty (30) days prior to conclusion of the then-current Membership Term.

Suspension: This Membership Agreement may be suspended for a period of up to 2 months. You must provide written notice of suspension no less than thirty (30) days prior to the suspension. Payments will not be charged to your payment method on record and services may not be received during the suspension period.

Transferability: The Membership Agreement and the services outlined herein may not be transferred or shared with another individual.

Acceleration of Payments: If you are in default of this Membership Agreement, Seller can immediately and without notice, demand payment in full of all unpaid installment(s) and applicable fees.

Dishonored Instrument / Declined EFT: If an automatic debit or electronic funds transfer for the payment of money drawn on any bank, depository, or credit card submitted by you is not honored or declined, then a fee will be added, per the following, in addition to any unpaid balance of this Membership Agreement. (A) A fee of not less than \$25.00, which fee is subject to change at Seller's sole discretion; (B) The amount allowed by state law; or (C) The amount equal to the actual fee imposed by Seller's payment processing provider as a result of the Client's dishonored instrument or declined EFT.

Notice: Any holder of this consumer credit agreement is subject to all claims and defenses which Client could assert against Seller. Recovery by Client shall not exceed amounts paid by the Client hereunder.

Waiver and Release of Liability: Skin MD Dermatology is not responsible for any injury or loss of property suffered by me while receiving treatments, for any reason whatsoever, whether resulting from the negligence of Skin MD Dermatology, its agents, employees, independent contractors, representatives, or guests, members, customers, or any other person or entity.

Consumer's Rights of Cancellation During Cooling Period (3 days after signing): You may cancel this contract without any penalty or obligation within 3 business days from the date below and receive a full refund of all payments made to Seller.

Signature

Date

Printed Name

Payment Information

Name on Card

Card Number

Expiration Date

Security Code

*Your payment information will be stored securely

***Please complete this form and mail,
fax, email, or drop off in person to
start your VIP membership!**