



Corporate Spa Link Property Membership Application

Corporate Spa membership is available to companies with three (3) or more spa properties. Each corporate spa membership includes one listed headquarters location with a contact person (additional members at the same property may be added to the membership for \$175 USD each) and at least two (2) linked properties each with a contact person (additional members at the same property may be added to the membership for \$175 USD each). **All Auxiliary Members will expire at the same time as the Primary Membership.** This membership application is divided into seven (7) sections.

You can download other applications at www.experienceispa.com. If you have questions regarding the application please contact the ISPA office at 1.859.226.4326 or ispa@ispastaff.com.

1. Corporate Link / Primary Member Contact Information

This information is published in the online version of the ISPA Membership Directory. ISPA members will use it to contact you, your company and the individuals listed below. Please note the first primary member will be a voting member of the association.

Name of Corp. Headquarters: _____

Link Property Name: _____

Name/Title (1st Primary Member): _____

Physical Address _____

No P.O. Boxes: _____

City, State, Postal Code: _____

Country: _____

Company Phone Number: _____

Direct Phone Number: _____

Fax Number: _____

Company E-mail Address: _____

Direct E-mail Address: _____

Web site Address: _____

Spa Open Date: _____

2. Additional Corporate Link Members' Contact Information*

***All additional individual members will expire at the same time as the Primary Membership.**

Auxiliary Member (Add one additional member with non-voting privileges for \$175 USD)

Name: _____ Title: _____

Direct Phone: _____ Fax: _____

Direct E-mail: _____

Auxiliary Member (Add one additional member with non-voting privileges for \$175 USD)

Name: _____ Title: _____

Direct Phone: _____ Fax: _____

Direct E-mail: _____

Auxiliary Member (Add one additional member with non-voting privileges for \$175 USD)

Name: _____ Title: _____

Direct Phone: _____ Fax: _____



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Direct E-mail: _____

Please attach a separate page for additional auxiliary members if necessary.

3. Payment Information

Please refer to the table listed below for your payment information. All membership dues are non-refundable. Please contact the ISPA office for wire transfer information.

Application Month:	Corporate Link Membership Cost General Membership Cost:	Your Membership Expires:
October 2009	\$439 USD	30-Jun-2010
November 2009	\$439 USD	30-Jun-2010
December 2009	\$695 USD	30-Jun-2011
January 2010	\$658 USD	30-Jun-2011
February 2010	\$621 USD	30-Jun-2011
March 2010	\$585 USD	30-Jun-2011
April 2010	\$548 USD	30-Jun-2011
May 2010	\$512 USD	30-Jun-2011
June-Nov. 18, 2010	\$457 USD	30-Jun-2011

Each additional individual added to the membership is \$175 USD. The ISPA membership remains in the possession of the payee.

My check is enclosed in USD Funds payable to ISPA I have included credit card payment information

Authorized Payment Amount (USD\$): _____

Charge to: American Express Visa MasterCard Discover

Card Number: _____ Card Holder Name: _____

Expiration: _____ Signature: _____

4. Verification Statement

In consideration of ISPA's review of its application for membership, _____ ("Applicant") and its officers, directors, employees and agents hereby agree:

- A. To waive irrevocably any claim or right of action at law or in equity that they may have at any time against ISPA, its Board of Directors, Officers, members, agents, and employees either as a group or as individuals, for any act in connection with the business of ISPA and in particular its acts in admitting, classifying or reclassifying, or granting or not granting membership; or in any act of censure, suspension or termination of membership for a violation of ISPA's bylaws, policies, regulations, or standards and practices.
- B. That upon request Applicant will provide such other information as may be necessary to support its membership classification, and if Applicant fails to do so, or if it is deemed inadequate, a reclassification of its membership or termination may be taken by ISPA as it, in its sole discretion, determines.
- C. To be bound by all decisions, bylaws, policies, regulations, standards and practices of ISPA as they are now or as they may be subsequently stated.



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D. Upon notification by ISPA of any failure to comply with any applicable bylaws, policies, regulations, standards and practices, to cure such deficiency or be subject to termination from any applicable membership category by ISPA within its sole discretion.

Applicant acknowledges that filling out this form does not guarantee or constitute membership or classification as a member.

Applicant agrees to receive association information via e-mail, mail and fax.

Applicant verifies that it meets the membership criteria for the class of membership applied for and that it agrees to abide by the terms set forth above, as presently stated or hereinafter amended.

Print Name: _____ Title: _____
Signature: _____ Date: _____

5. ISPA General Standards and Practices for Spa Members

ISPA requires that each Member Spa adhere to its Standards and Practices. To that end, you and your spa will ensure that:

STAFF

- Staff, when hired, is provided with a Policy and Procedures Manual that is reviewed and updated annually.
- Staff is provided with and/or given access to constantly updated Treatment Procedure and Product manuals for all treatment modalities, including the spa's menu.
- Staff is given a job/responsibility description upon hiring, followed up with at least one annual evaluation of each individual's job performance.
- All specialized staff such as fitness instructors, personal trainers, massage therapists, estheticians, nail technicians, hairstylists, nutritionists, physiologists, psychologists, and medical technicians comply with applicable international, federal, state and local regulations with regard to licensing, registration and appropriate certification.
- The Director/Supervisor of any fitness and/or aerobics program has at least a bachelor's degree (or equivalent) in an appropriate area of study, or a current certification from a nationally recognized organization in the health/fitness industry, such as the American Council on Exercise (ACE), Aerobics and Fitness Association of America (AFAA) or the American College of Sports Medicine (ACSM) or their international equivalents.
- During operating hours there is at least one staff member scheduled on-site who has current CPR certification.
- Staff who perform advanced techniques and/or use advanced technology are appropriately trained and function in compliance with the manufacturer's instructions and guidelines.

SAFETY

- During hours of operation and for all physically challenging, supervised activities held both on (e.g., hydrotherapy) and off (e.g., hiking) site, there is at least one staff member scheduled and present who has current CPR and first-aid certification.
- A first-aid kit is properly stocked and readily available at all times.
- A written emergency plan is posted in plain view at all appropriate staff stations. The plan includes standard emergency procedures for specific incidents and phone numbers of police, fire and emergency medical assistance.
- All procedures for cleaning and maintenance are in accordance with applicable international, federal, state and local regulations, and with appropriate manufacturer's guidelines.
- All floor surfaces are designed and constructed to accommodate the intended activities for each area.
- Signage is posted to alert and educate guests about possible risks and practices as needed in areas such as: exercise studios, pools, wet areas, saunas, steam rooms, whirlpools, racquet sports courts and any other potentially hazardous areas.



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- The spa has an ongoing monitoring system for ensuring appropriate control of temperatures in all areas where guests are exposed to high thermal stress (e.g., saunas, steam rooms, whirlpools and exercise rooms).
- The spa's facilities and operating procedures comply with all applicable international, federal, state and local regulations including OSHA and the Americans with Disabilities Accessibility Guidelines for Buildings and Facilities.
- If the spa includes fitness and weight training equipment, staff is available to provide assistance and instruction in the proper and effective use of such equipment.

GUEST RELATIONS

- Written material is provided that accurately depicts the facility, nutrition/diet/wellness and other programs, philosophy, rates, deposits, customary tipping and gratuities, cancellation policy and grace period for refunds.
- All new spa guests and/or annual members are given an orientation and tour of the spa as soon as possible upon arrival.
- Guests complete a confidential screening questionnaire and/or informed consent statement appropriate to their planned activities. All guest history and counseling session information is considered private and confidential, and such information is not disclosed by the spa or its coworkers without the proper consent of the individual, unless such a disclosure is required by law.
- The spa promptly responds to guest complaints and resolves them in as timely and efficiently a manner as possible. The spa attempts to resolve within 60 days any consumer complaints brought to its attention by state or local consumer protection agencies or ISPA.
- Guests are able to express their concerns and suggestions regarding facilities, staff and programming through a feedback system designed to encourage guest feedback.
- The spa has current liability insurance or the equivalent for the purpose of guests' protection.
- All programs are flexible enough to accommodate a variety of individual goals, fitness levels and needs.
- Spa programs and menus are designed to encourage the guest toward health enhancing activities and wellness while acknowledging the guest's current health status.

SERVICE

- Staff is courteous, helpful, knowledgeable and articulate.
- Staff is committed to anticipating the guests' needs and serving them.
- Staff believes in the precepts of spa wellness and is willing and able to share these philosophies with guests.
- Staff zealously guards the guest's privacy and modesty.
- Staff is attentive to preserving the spa environment at all times.

CODE OF ETHICS

- Member will be guided in all activities by truth, accuracy, fairness and integrity.
- Member pledges loyalty to the Association and agrees to pursue and support its objectives.
- Member pledges to keep informed on the latest techniques, developments and knowledge pertinent to professional improvement.
- Member will help fellow members reach personal and professional fulfillment.
- Member will utilize every opportunity to enhance the public image of the spa industry.

_____ ("Member") hereby agrees to abide by the General Membership Standards and Practices of ISPA. In the event that ISPA becomes aware of any failure to adhere to these Standards and Practices, it shall notify the Member of such noncompliance. Should the Member fail to cure such deficiency, ISPA, in its sole discretion, may terminate the Member from membership and/or any applicable category of membership.

Nothing herein shall create any rights in third parties or responsibilities of ISPA with respect to the operation of any Member spa.



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Print Name: _____ Title: _____
 Signature: _____ Date: _____

6. How did you hear about ISPA?

We would like to know why you decided to become a member of ISPA. Please check the box or boxes that apply. Use the space available to provide the name if applicable.

- Pulse Magazine
- Another ISPA member _____
- ISPA Web site
- I received information from ISPA.
- ISPA Event (Conference, Knowledge Networks) _____
- Other _____

7. Complete Application

In order to avoid delays in the membership application process, be sure to fill out the application in its entirety. Please return this completed application to the International SPA Association:

2365 Harrodsburg Road, Suite A325
 Lexington, Kentucky 40504 USA
 1.888.651.ISPA (4772) or 1.859.226.4326
 Fax: 1.859.226.4445 ispa@ispastaff.com

- Once we receive your application, we will send you an e-mail to verify we received it.
- Approximately one week after your application is accepted, you will receive your Web site log in information via e-mail. At this time, please be sure to log in to fill out your products & services checklist and to review your contact information.
- Approximately 4-6 weeks after your application is received, you will receive your new member kit in the mail. This will include all of your member benefits information.