

SpectraVision Online Community Agreement

Terms and Conditions:

The SpectraVision Online Community is designed to support SpectraVision and BodyScan practitioners by creating an online virtual community for sharing resources, information, and support. It isn't designed to be a complaints department, or a place to air frustrations. It is designed to offer an oasis for balancing out the difficulties and challenges in providing Professional Bionetic Services to our friends, families, and communities in a spirit of love and fellowship on a membership basis. It requires a pc compatible computer with high-speed internet access. Although material or content that is contained within this community includes materials for course credit, I realize that I must pay additionally for Certification as a Bionetic Practitioner (CBP Program). The test taking fee for Course Credit is additional. Otherwise you can use the information for your own personal betterment without receiving course credit. **Please call for additional information.**

The on-line services can be cancelled due to non-payment, or violation of the terms and conditions herein, however, it doesn't shorten the term of this Agreement in any way. If Veridia terminates or cancels this agreement due to non conformance, Veridia may declare all amounts owed to be immediately due and payable.

Payment:

I agree to pay Veridia a total of \$240.00 for access to the SpectraVision Online Community and to receive on-going Practitioner Support. I understand that this is an Annual Contract. I agree not to share my password or log in, or the materials with others and will offer my emotional support behind this service in unity so that all of us might find mutual success in our endeavors to heal the world.

Billing My Credit Card:

I agree to have my credit card billed according to my payment option selected in order to meet the annual membership qualifications and I will make sure that I will provide Veridia with credit card information that will not expire prior to the expiration of this Agreement.

Effective Dates: _____ to _____ (12 months)

Payment Options: _____ Prepay \$ 240.00 Billed Monthly \$ 20.00

CC: _____ Exp _____ (min 12 mos) 3-Digit Code _____

Billing Address: _____

Please bill my credit card according to the above agreement terms and conditions.

Signed: _____ Date: _____

Print Name: _____