

Registration Instructions

Welcome to the Rapid Results Weight Loss Program. These are the instructions for making sure that we receive everything that we need to process your registration. Please contact us if you have any difficulties or questions. It is our goal to make this process as simple as possible. These things need to be received by our office in order to schedule your startup orientation with your coach:

Step One: Your registration

- **Option one**: You can register online at <u>www.YesRRWorks.com</u> by scrolling down to your desired program and "booking" the orientation time of your choice and complete your online registration form and payment.
- **Option two**: You can download your registration forms as a PDF, fill in the required information and email them back to us.
- **Option three:** You can print the registration forms, fill them out and mail them in. This option will take 3 to7 days to complete.

Registration includes:

- a. Program Policy Agreement: a breakdown of our program requirements
- b. **Registration Form**: giving us some basic information about you and your weight loss history
- c. Registration Instructions: How to send your starting weight and photos

Step Two: Your Registration Payment

- **Payment Option One:** Online payment at the time of registration
- **Payment Option Two EFT: PayPal, CashApp or Zelle:** If you decide that you do not want to pay online at the time of registration, you can tell us on your online registration form if you prefer to use one of these electronic forms of payment and we will send a payment request. You DO NOT have to have a PayPal account to pay this invoice.
- Payment Option Three U.S. Mail: Lastly, you can make your registration payment with a cashier's check or money order payable to The Good Better Best Corporation and mail to: 30799 Pinetree Rd. #117 Pepper Pike Ohio, 44124

We do not accept personal or business checks



•	Name:	_ Date:
•	Age Height	Gender: Male / Female
•	Cell	Alternate number
•	Email (print clearly)	
•	Home Address	CityState/Zip
•	Emergency Contact: Name	phone:

Communication

- I am on: Facebook / Instagram under the name _____
- I prefer my coach contact me by: (circle all that apply) Text / Call / Email

Health and Fitness History

- I heard about Rapid Results Weightloss from: _____
- I currently do cardio exercise? Yes / No Weight Train? Yes / No
- I am/ am not currently in another weight loss or fitness training program
 Explain______
- Are you on any medications or under a doctor's care for any reason?

NO___YES___(explain)_____

Liability Waiver

I hereby waive any and all claims of liability or damages that I may have, or that I might claim to have against The Good Better Best Corporation, their agents, volunteers, contractors, assigns, designees and employees for any injuries, impairments, aliments and or conditions that I may experience as a result of participation in the Rapid Results weightloss program, Rapid Results personal training and any other program offered under the Good Better Best Corporation. Also, by signing below I acknowledge my responsibility to pay the total price of this program regardless of my level of participation. I understand that non-payment may result in collections activities and possible reporting of outstanding debt to the credit bureaus. Must be 18 years or older to sign. We recommend that you consult a physician before starting any nutrition or exercise regimen. Sign below to acknowledge that you agree to these terms and conditions.

Participant sign_

date____



NON-DISCLOSURE AND CONFIDENTIALITY AGREEMENT

THIS AGREEMENT entered into on _______ is for the Professional Association and arrangement of Non-Compete, Non-Circumvention, Non-Disclosure and Confidentiality between The Good Better Best Corporation whose office is located at 30799 Pinetree Road Suite 117 Pepper Pike Ohio, 44124 and _______ whose principal address is at

hereinafter called "the signee"

The signee with this agrees to respect the integrity and tangible value of this agreement between them.

THIS AGREEMENT is a perpetuating guarantee for five (5) years from the date of execution and is to be applied to any and all transactions present and future of the introducing party including subsequent follow-up, repeat, extended, renegotiated and new transactions regardless of the success of the project.

Because of THIS AGREEMENT the parties involved in this transaction may learn from one another or from principals the names and telephone numbers of clients and vendors their associates and heirs, assignees affiliates subsidiaries, designees, proxies, individual and or trusts, or contractors, subcontractors, suppliers or any such providers of valuable business interests hereinafter called "contacts". The signee with this acknowledge accepts and agree that the identities of the contacts will be recognized by the other party as exclusive and valuable contacts of the introducing party and will remain so for the duration of this agreement.

The signee agrees to keep confidential the names of any contacts introduced or revealed to the other party, and that their firm, company, associates, corporations, joint ventures, partnerships, divisions, subsidiaries, employees, agents heirs, assigns, designees, or consultants will not contact, deal with, negotiate or participate in any transactions with any of the contacts without first entering a written agreement with the party who provided such contact unless that party gives prior written permission. Such confidentiality will include any names, addresses, telephone, telex facsimile, social media, numbers, email address, and or other pertinent information disclosed or revealed to either party.

The signee agrees not to disclose, reveal or make use of any information during discussion or observation regarding methods, concepts, ideas, products, services, or proposed new products or services, not to do business with any of the revealed contacts without the written consent of the introducing party or parties

The signee agrees that due to the many variables surrounding each business financial transaction that will occur because of this agreement, the commission to be paid and or the fee structure between the parties can vary. A separate fee or commission agreement will outline compensation

for each business or financial transaction. The fee or commission agreement must be drafted and acknowledged by signature before all business or financial transactions.

In case of circumvention, the signee agrees and guarantee that they will pay a legal monetary penalty that is equal to the commission or fee the circumvention for each occurrence. If either party commences legal proceedings to interpret or enforce the terms of THIS AGREEMENT, the prevailing party will be entitled to recover court costs and reasonable attorney fees.

The signee will construe THIS AGREEMENT in accordance with the laws of the State of Ohio, County of Cuyahoga. If any provisions of THIS AGREEMENT is found to be void by any court of competent jurisdiction, the remaining provisions will remain in force and effect.

THIS AGREEMENT contains the entire understanding between the parties and any waiver, amendment or modification to THIS AGREEMENT will be subject to the above conditions and must be attached hereto.

Upon execution of THIS AGREEMENT by signature below, the parties agree that any individual, firm, company, associates, corporations, joint ventures, partnerships, divisions, subsidiaries, employees, agents, heirs, assigns, designees or consultants of which the signee is an agent officer, heir, successor, assign or designee is bound by the terms THIS AGREEMENT.

An email copy of this Non-Compete, Non-Circumvention, Non-Disclosure and Confidentiality agreement shall constitute a legal and binding instrument. By setting forth my hand below I warrant that I have complete authority to enter into THIS AGREEMENT.

The Good Better Best Corporation

Tanya Richardson

Attorney in Fact

Name of signee (PRINT)_____

Signature _____ Date _____



Photo Release

We would love to use your successful progress photos and videos to promote our program however, we respect your privacy and will only use your photos and videos with your written permission. Also, know that you can change your mind at any time, and we will update this form to reflect your choice to either use or not use your photos.

I hereby grant The Good Better Best Corporation permission to use my likeness in photograph(s) and video(s) in any and all of its

publications and in any and all other media, whether now known or hereafter existing, controlled by The Good Better Best Corporation, in

perpetuity, and for other use by the Good Better Best Corporation for the use of the photograph(s) or video(s)

I DO NOT GRANT PERMISSION TO USE MY LIKENESS IN PHOTOS OR VIDEOS _____(initial)

BY SIGNING BELOW, YOU AGREE TO GIVE US PERMISSION TO USE YOUR LIKENESS IN

PHOTOS/VIDEOS

Name (print please) _____

Signature _____

Requested by The Good Better Best Corporation



Our purpose

The Rapid Results weight loss program is designed to teach you how to manage your weight, your health and your quality of life. We achieve this using an educational approach including a variety of written assignments, food education assignments, meal planning and meal prep lessons, basic nutrition education, stress management tools and therapeutic support to address emotional barriers that are limiting your weight loss success. Please read over our policy and procedure details and sign this document only if you agree to all terms included. Your coach is ready to answer any questions that you may have about these policies.

Course Supply List

Because our program can be completed from the comfort and privacy of your home or office, every participant will need the following supplies to participate

- o Digital scale (to send weekly weigh-ins)
- Digital camera or **camera phone** (to send food pictures and weight each week)
- Food scale, measuring cups and measuring spoons (to prepare your meals)
- Computer with internet and printer

Course Payment Policy

• NO REFUNDS ONCE ORIENTATION MATERIALS HAVE BEEN SENT

- Must complete and sign registration form
- Must sign attached payment agreement (only for those with payment arrangements)
- We must have all post-dated checks (if using checks for payment arrangements)
- We need 24-hour notice if you want to change form of payment
- There is a \$5 fee added to each split payment (ex: \$100 total=2 payments of \$55 not \$50)
- $_{\odot}$ You will be suspended for payments not received within 7 days of agreement dates
- Once under payment suspension you must pay total past due amount to continue

Academic Probation & Expulsion Policy

- Probation if GPA under 3.0 for more than 1 week (B average)
- Course fees are still to be paid during academic probation or suspension
- Student on probation are given extra credit assignment(s) to earn GPA of 3.0
- Extra credit assignment must be completed within 7 days or you are suspended for 30 days. Suspended students may not re-enroll without approved petition
- Students who fail to get approved petition must sit out for 30 days and may not reenter course until they obtain an approved petition.

Course Grading Scale & Additional Information

You will be evaluated based on 3 key areas of success. Each area has been detailed below along with the grading scale used. Each area is totaled up monthly to calculate your student evaluation grade. You will receive your evaluation via email and discuss your scores with your coach. If the average score is lower than a 3.0 you will be placed on 1-week probation. During this week your coach will give you an assignment that, if completed will help you earn your 3.0 average. If you do not complete the assignment as instructed within that week you will be suspended from the program for 30 days and will need to petition to reenter the program.

The 3 Evaluation Areas

Communication (15 points)

- ✓ Sends food pictures as assigned
- ✓ Responds to instructor emails and text messages in a timely manor
- \checkmark Communicates with instructor when you are in need of instruction or support

Participation (10 points)

- ✓ send your weigh-in pictures as assigned
- ✓ timely weekly session attendance
- complete food and video assignments timely as instructed (extra credit participation. 5 points each. 10 points if results in a registration)
- ✓ Promotes the program on your social media pages using #RapidResultsWorks
- ✓ Refer friends, family and coworkers (be sure to tell them to mention your name)

Weight Loss (15 points)

 ✓ Has achieved weight loss relative to program completion (example: have you lost 50% of your goal weight at your halfway point in the program)

Evaluation A 15-13 B 12-8 **C 9-5 (- week probation)** D 4-2 F 1-0

PLEASE SIGN TO ACKNOWLEDGE THESE POLICIES

DATE_____



section 1:

I am making a commitment to pay Rapid Results Weight Loss and Personal Training the sum of **\$499.00** which is my monthly program fee for RR90 plus PT2X-30, in addition to a **\$5** service fee per payment. I understand that these payments are to be made regardless of my level of participation. I understand that these payments are to be made even in the event of my being suspended or voluntarily discontinuing the program. I acknowledge that I am to make my initial payment of **\$171.33** at the time of my registration and the remaining payments of **\$171.33** are due on the same date as my initial payment the following 2 months. I understand that all payments are non-refundable and that I reserve the right to petition to have this agreement cancelled for medical reasons. I understand that I will be offered payment arrangements if necessary, to ensure that this debt is paid in full.

section 2:

I understand that this is a binding legal document and that failure to make payments in the amounts above and on the dates above may result in my being suspended from the program and payments 30 days past due are subject to collections activity including credit reporting of the default payments.

section 3:

Participants Signature ______ today's date

The payee understands that failure to make payments in accordance with this payment agreement shall result in legal action against the payee by the oblige. The payee acknowledges by signing below that the full amount of this agreement must be paid even in the event of program suspension, expulsion or if payee voluntarily discontinues program participation.

Witness Tanya Richardson, Founder and CEO