



## CAPE WELLNESS COLLABORATIVE, INC. PROVIDER AGREEMENT

In consideration of Cape Wellness Collaborative, Inc. (hereinafter referred to as "CWC") providing client referrals to \_\_\_\_\_ (hereinafter referred to as "Provider"), CWC and Provider herein agree as follows:

1. In servicing CWC clients, Provider agrees to adhere to the highest quality accepted standards of care in the area of specialization of the Provider: including all state, federal and municipal regulations and standards that relate to licensure;
2. In addition, Provider agrees, at all times, to adhere to rules and regulations, as may be adopted from time to time by CWC, regarding client care;
3. Provider agrees that, prior to providing services to CWC clients, Provider shall have been approved by CWC and shall, at all times, maintain General Liability Insurance, the cover page of which shall be provided to CWC, and shall maintain all professional licenses in current status. In the event that Provider is not an individual practitioner, but is a fitness center, yoga studio, or any other entity providing services to a group, Provider warrants and represents that it and its instructors are insured in accordance with the within Agreement. In addition, said Provider provides full indemnification to CWC, as described herein;
4. Provider shall adhere to all policies promulgated by CWC relative to charges for services rendered, as well as the invoicing and payment policies adopted by CWC;
5. Provider shall fully indemnify and hold harmless CWC from any and all claims, of whatever name or nature, which may be made against Provider or CWC arising out of the Provider's provision of services to CWC clients. Further, Provider agrees to be responsible for all costs and reasonable attorney's fees arising out of any defense of such claims that may be incurred by CWC.
6. Provider agrees to charge no more than \$100 per hour for an oncology massage, \$90 per hour for a massage and \$70 per hour for all other modalities.

Signed as a sealed instrument this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Provider \_\_\_\_\_

Cape Wellness Collaborative, Inc.