

Enrollment Agreement

This enrollment agreement must be signed and returned. Mail or fax immediately. Though shipment and on-line access may have been granted prior to your return of this agreement, your enrollment remains conditional until the hard copy is received. Your failure to return it does not release you from the obligations as outlined or have any effect upon the Refund, Return Policy. Failure to comply will result in no final examination and no grade or certificate will be forthcoming.

Meditec.Com
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- 1. Registration Fee** - A nonrefundable registration fee of \$45 is due at the time of enrollment.
- 2. Fees:** Course fees are as posted, on-line set-up is \$300 (included in the course fee), shipping and handling are as invoiced.
- 3. Cancellation, Return Refund Policy and Extensions** - the policy is as published on the website [<http://www.meditec.com/meditec-return-policy.html>] and that full disclosure and acceptance is incorporated into this enrollment agreement.
- 4. Time to Complete:** You have 3 months to complete an individual module. If you are unable to complete, you may request an extension at no charge. After one year, if you wish to extend your access to the courseware and reference material at the website, a fee is charged. The fee allows 4 months' additional access.
- 5. Financing/Payment Plans** - As noted, to obtain financing, you will have already communicated with an enrollment coordinator. If you were approved for a loan, shipments and online access may coincide with your future payment schedule and compliance. When incremental shipments are sent, you will be responsible for the shipping and handling charges. All financed plans include a 3-day rescission agreement, but once the loan is accepted and/or funded, you are obligated to pay.
- 6. Placement** - You are aware that enrollment in these programs provides no guaranty of employment, nor is any kind of warranty intended, extended or implied. The Jumpstart (MT) program has its own provisions (you will be provided that documentation if you enroll in that program, and are eligible to participate).
- 7. The course(s)** you have selected _____, at a price of _____.
- 8. Certificate of Completion:** A certificate of completion will be awarded when the final examination is passed with a score of 84% or higher.
- 9. Miscellaneous** -

- a. If you plan to pay with a personal check expect a delay of 14 to 21 business days in delivery of the materials due to bank policies on funds availability and clearance of funds.
- b. The Cancellation, Return and Refund Policy is the same whether you are financing or paying in full (that policy is incorporated herein by reference).
- c. The Postsecondary Proprietary School Act Rule 152-34-4 notes that students enrolling in any post secondary school must have a high school diploma, or a GED certificate, or are over the age of 18. By signing this enrollment agreement, you are acknowledging that you are in compliance with that requirement.
- d. Credit card disputes not in compliance with the Refund Policy will result in a monetary penalty.
- e. Transferability of a course enrollment shall only be permitted at the sole discretion of Meditec.com. Such transfer must include all original materials and/or equipment in reasonable working condition and the transferee shall be required to sign a new enrollment agreement, and will be required to pay additional fees, as determined by Meditec.com at the time of the transfer, and also at our sole discretion. Once the transfer has been approved, the original enrollee shall have no further rights or interests.

I hereby certify that I have read the general policies, understand, and I am committing to the terms of this Enrollment Agreement in its entirety. I further acknowledge that this written agreement is the final agreement relating to my enrollment, and replaces any verbal or other communication that may have been made contrary to what is contained in this Agreement.

PLEASE PRINT:

Name: _____

Address: _____

City, ST, Zip: _____

Social Security Number: _____/_____/_____

Phone Number [Home]: (_____) _____-_____

Phone Number [ALT]: (_____) _____-_____

Signature: _____ Date: ____/____/____

For Meditec.com

Enrollment Coordinator _____ Date: ____/____/____