



Enrollment Application



Mail To: Attention: ACS, 300 S. Sycamore St., Ste. A, Santa Ana, CA 92701
Fax: (714) 543-3935 Tel: 1-(877)-9MY-FICO

Social Security No. _____ Date of Birth _____
 First Name _____ Last Name _____ Middle Initial _____
 Street Address _____ Apt/Suite _____
 City _____ State _____ ZIP Code _____
 E-mail _____ Home Phone _____
 Work Phone _____ Cell Phone _____
 I am a member of the _____ Credit Union.
 I am not a member of a credit union, but I am interested in becoming a member.

Payment Information

Enrollment Fee: \$549.00

Tender: Credit Card Personal Check Business Check Money Order

Payment by Credit Card

VISA MasterCard Discover American Express
 Credit Card No. _____ CVV _____ Expiration Date _____
 Card Holder Name _____ Street Address _____
 City _____ State _____ ZIP Code _____

Payment by Personal Check/Money Order (Make Checks Payable to: Financial Education Services, Inc.)

Routing Number: _____ Account Number: _____ Check Number: _____
 Check Writer's SSN: _____ Check Writer's Phone Number: _____
 Check Writer's Name: _____
 Street Address _____ Apt/Suite _____
 City _____ State _____ ZIP Code _____

Payment by Business Check (Make Checks Payable to: Financial Education Services, Inc.)

Routing Number: _____ Account Number: _____ Check Number: _____
 FIN #: _____ Business Phone Number: _____
 Company Name: _____ Street Address: _____
 City: _____ State: _____ ZIP Code: _____

****Note: Missing or Invalid Payment information may delay in processing the application.
Please verify that the above information is correct before submitting application.****

Please accept my application and enroll me in the services of Financial Education Services, Inc. I understand that I have three (3) business days to cancel this application. After 3 business days, a processing fee deduction may apply. I have read and understand this page of the application and the Terms and Conditions of Enrollment and have signed this page and the Terms and Conditions of Enrollment and the Limited Power of Attorney.

Applicant Signature

Date

Sponsor Agent Name: _____ Sponsor Agent ID: _____

Internal Use Only

Date Received: _____ Amount Received: _____ User Initials: _____ Approval Code: _____



Enrollment Application



Terms and Conditions of Enrollment

1. **Financial Education Services, Inc.**, "FES", is an affiliate of a federal credit union and is primarily engaged in providing financial education services for the benefit of the affiliated credit union, its membership, the membership of non-affiliated credit unions contracting with FES, and to prospective credit union members. American Credit Education Services is a division of Financial Education Services, Inc.

FES IS AN AFFILIATE OF A FEDERAL CREDIT UNION EXEMPT UNDER THE CREDIT REPAIR ORGANIZATION ACT (15 U.S.C. §§ 1679, ET SEQ.), AND IS NOT A CREDIT REPAIR ORGANIZATION. ALL SERVICES PURCHASED BY A CONSUMER ARE PERFORMED BY EMPLOYEES OF FES.

2. Applicant agrees as follows:

- To promptly provide **Financial Education Services, Inc.** copies of any and all correspondence received from the credit reporting agencies and creditors supplying information to those agencies, which relates to inaccurate credit report entries that are subject to challenge and verification pursuant to this Agreement within fourteen (14) days of receipt thereof.
- While this Agreement is in effect, Applicant will not apply for any type of credit, including credit cards, car loans, or secured financing without written notification to, and consultation with, **Financial Education Services, Inc.** at least 7 days prior to submitting the credit application.
- Applicant understands that credit reporting agencies have no obligation to remove accurate, verifiable information unless it is listed beyond that period of time in which it is lawful to report it.
- Applicant understands **Financial Education Services, Inc.** cannot guarantee specific results due to the fact that all results obtained are dependent on a variety of factors, some of which are outside the control of **FES**, including Applicant's ability to repay creditors, the cooperation of Applicant's creditors, and the credit reporting agencies' ability to verify information provided to them by Applicant.

3. Once Applicant has been enrolled and the account is set up, Applicant must continue working in good faith with **Financial Education Services, Inc.** for at least three (3) months. After three (3) months enrollment, if applicant is not satisfied for any reason, Applicant may request a refund. Applicant will receive the full amount of his or her enrollment fee, less a one hundred twenty-five dollar (\$125.00) set up fee and a twenty-five dollar (\$25.00) fee for each inaccurate credit item removed or corrected while Applicant was enrolled. To be eligible for a refund, the total sales price must be paid in full. No refunds will be issued on contracts with balances due or where only partial or installment payments have been made. Any client, who wishes to stop the credit education service outside of the three-day cancellation period, but prior to the second payment, will forfeit the amount of the first payment.

Applicant will be provided with 3 sets of dispute letters, an UltraScore™ document and granted access to the UltraScore™ Web site, which provides a full analysis of their credit score, and access to the education and resource center and library. The length of service is approximately 8 months.

The UltraScore™ product and the initial set of dispute documents are printed and mailed together to the Applicant upon the completion of the file and the expiration of the 3-day cancellation period.

4. **Financial Education Services, Inc.** will stop process if the payment is not received on the date indicated on the payment plan billing option. A \$30 fee will be applied to any late payment received after the due date, includes declined charge payments and returned checks.

5. If paying by check, your check may be electronically deposited. Make all checks payable to Financial Education Services, Inc.

6. A \$10 fee may be applied to replacement copies of dispute letters.

Dispute Resolutions. If a dispute rises out of this contract, and if it cannot be settled by the parties, the parties agree first to try to settle the dispute by mediation administered by the American Arbitration Association, "AAA", under its Commercial Mediation Procedures. If they do not resolve the dispute within 60 days, then, upon notice by either party to the other, all disputes, claims, questions or differences shall be finally settled by binding unappealable arbitration administered by the AAA. In any such proceeding, which must take place in the State of Michigan, each party shall bear their own attorney fees and costs, the fees and costs of any arbitrator selected by them, and one half the fees and costs of any neutral mediator or neutral arbitrator.

Applicant may cancel his or her Enrollment within three (3) business days from the date this Enrollment Agreement is received by **Financial Education Services, Inc.** To cancel this enrollment, please send written notice stating your name, Social Security number and request for cancellation by fax to: (248) 848-9140 or mail to **Financial Education Services, Inc.**, PO Box 159, Farmington, MI 48332. There is no penalty for cancellation. If you cancel, you will receive a full refund of the entire payment made to **Financial Education Services, Inc.** and all obligations between the parties shall be null and void.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS OF ENROLLMENT.

Signature _____

Date _____



Please Notice!

The following documents are required by the credit reporting agencies. Financial Education Services, Inc. **CANNOT PROCESS YOUR APPLICATION WITHOUT THE FOLLOWING ITEMS:**

1. **Social Security Verification.** Listed below are the documents accepted by the credit reporting agencies, include **ONE** of the following:

- Ø Copy of your Social Security card
- Ø Copy of your pay stub showing your full 9-digit Social Security number
- Ø Copy of your W-2 tax return form
- Ø Photocopy of Health Insurance Card showing your full 9-digit Social Security number

2. **Address Verification**

- Ø Photocopy of a preprinted bill (utility, credit card, etc.) with your name and current address where you reside
- Ø Photocopy of your driver's license

3. **Completed Application** (including payment)

4. **Signed Terms & Conditions of Enrollment**

5. **Signed Limited Power of Attorney**

Fax To: 248-848-9140

Mail To: American Credit Education Services

PO Box 159, Farmington, MI 48332

E-mail: customercare@american-credit.org

Limited Power of Attorney

I hereby give authorization to request credit reports from all three consumer credit reporting agencies for the purpose of providing financial credit lending information. I further authorize and request that the agency using this information deliver a copy of the credit documentation and mortgage pre-qualification information to me or a designated agent via US mail, fax or e-mail.

Date

Name (Please Print)

Signature