ACCELERATED PACKAGE - REGISTRATION FORM

You are registering for the Accelerated Package. These classes are flexible so please write below the day(s) and time(s) that you wish to attend. Package includes 12 hours; these have to be used in 2 to 4 weeks.

PLEASE PRINT CLEARLY
Please Return Registration As Soon As Possible

Date: ________________________________________________________________________________________________________________

Name: _________________________________________________________________________ M _______ F___________ SSN#___________

Address: ______________________________________________________ City: ________________________________ Zip: _______________

Phone Number (s): Home # (____) _____-________________ Work (_____) _________-________________ Cell (_____) _____-______________

E-mail: ______________________________________ Profession: _____________________ Company: _________________________________

Emergency contact (s): _________________________________________________________ Phone Number: (____) ____ - ________________

PLEASE SELECT CLASS PACKAGE
Prices are based on 12 hours take in a period of 2 to 4 weeks - $60 registration fee per year applies.

ACCELERATED PACKAGE
$555

TOTAL PAYMENT FOR 1ST MONTH
Including Registration
$615

Please write below the day(s) that you wish to take class(es), time, and starting date.

*Class Day (s): _____________________________________

*Class Time (s): ____________________________________

*Class starting date: __________________________________

PLEASE SELECT A PAYMENT METHOD
PAYMENT REQUIRED MONTHLY IN ADVANCE TO AVOID LATE FEES
Late Payment Fee $10 *Returned Check Fee $20

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<th>☐ CHECK</th>
<th>☐ CREDIT CARD</th>
<th>☐ AUTOMATIC WITHDRAWAL</th>
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<tbody>
<tr>
<td>☐ Full Payment</td>
<td>☐ Full Payment $____________________________</td>
<td>*Register for monthly payments!</td>
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<tr>
<td>$________________________</td>
<td>Name as it is on your credit card: ____________________________</td>
<td>☐ MONTHLY PAYMENTS</td>
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<tr>
<td>Check # _________________</td>
<td>Credit Card Number ____________________________</td>
<td>Amount will be based on the class package selected above.</td>
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<td>Exp. ___________ Sec.code-__________________</td>
<td>1ST MONTH PAYMENT</td>
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<td>Please include a voided check with your registration form.</td>
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Spanish is Fun, LLC (“SIF Language School”) Policies

SIF LANGUAGE SCHOOL CANCELLATION AND PAYMENT POLICIES FOR ACCELERATED PACKAGE

1) You are register for an Accelerated Package; 12 classes to be taken in a 1 month period.

2) Cancellation of a class

   (a) In the event of an emergency and you need to cancel a class, please notify the Spanish is Fun, LLC (SIF Language School) office as soon as possible after the emergency and prior to the scheduled class time. Text at 720 366 5694 with your name call, leave a message if you are unable to speak with a staff person. The message should include your name, the date and time of the message, and the nature of the emergency. Also, the message should include the date and time of the class that you cannot attend. When a class is cancelled in this way based upon an emergency, you may make it up subject to SIF Language School staff availability.

   (b) Except for emergency cancellation, if you cancel a class 48 or more consecutive hours in advance of the class date and time, the class can be rescheduled; provided, however, you may make-up only one cancelled class and the make-up must be within the calendar month in which the cancelled class was scheduled, subject to SIF language School staff availability.

   (c) Except for emergency cancellation, if you cancel a class **within 48 consecutive hours** from the scheduled date and time, or do not attend a scheduled class, the fee for the class will not be refunded and you cannot make up or reschedule the class.

3) Vacation/Discontinuing taking classes. If you will not be attending a scheduled class due to your vacation or because you will discontinue attending classes, please notify SIF Language School at learning@SIFlanguageschool.com. You should do this no later than **15 consecutive days prior to the date of the scheduled class you will not attend** because of your vacation or the first scheduled class of the classes that will you no longer attend. If you do not so notify SIF Language School you will be charged and liable for payment for two classes at the class rate applicable to the class.

4) Other than for cancellation per 2(a) and (b), you will not be entitled to make-up a missed class at no charge - a fee will apply to it at the then-applicable rate and make-up will be subject to SIF Language School staff availability.

General Cancellation Policy

SIF Language School reserves the right to cancel a class and or class period without any liability or obligations whatsoever to anyone if, in its sole discretion, it believes enrollment is insufficient for the class or class period or for any other reason. In the event of cancellation, SIF Language School will refund all refundable deposits and tuition fees theretofor paid to it.

An annual $55 registration fee applies to all classes, unless expressly otherwise noted in information about classes in SIF Language School promotional literature. The fee does not apply to special workshops or immersion programs unless otherwise indicated in information about such activities. Anyone who discontinues enrollment in a SIF Language School class or class period for a period of two consecutive months and thereafter re-enrolls in a class or class period, will be charged a $55 registration fee that will be applicable to the re-enrollment.

If you have questions about these policies, or otherwise, contact Silvia C. Velez, Director of SIF Language School. No person except Ms. Velez has authority to make any binding commitment by or agree to any obligation whatsoever of SIF Language School or its staff.

Release: I hereby grant to SIF Language School the non-exclusive right to take photographs of me and or my child(ren) in connection with any SIF Language School class or event, free and clear of all claims by me or anyone else, as well as the right (a) to use my and or my children’s/child’s name, image, likeness, and biographical information about me and or my child(ren) for lawful purposes, in whole or in part or in composite, in connection with and or to advertise and promote the activities and business of SIF Language School in all mediums of expressions now or hereafter known or developed; (b) to edit, adapt, alter, abridge, condense, and or combine such photographs with other photographs and material by any means or methods now or hereafter known or developed; as well as to (c) claim and possess all right, title, and interest in and to the photographs and other material, including copyright therefor. SIF Language School may authorize others to exercise such rights.

Non solicitation policy

I represent and warrant that, whether individually or through another person, I will not, directly or indirectly, solicit, induce, recruit, encourage or otherwise endeavor to cause or attempt to cause any SIF Language School employee, contractor, instructor, teacher, or consultant to terminate their relationship with SIF Language School or to provide Spanish language instruction and or translation services directly to or for me or to or for any member of my family or any my acquaintances rather than through the services of SIF Language School, without SIF language school’s prior written consent. In the event that I breach the foregoing, SIF Language School shall thereafter have the right to immediately cease providing services to me and, in such case; I shall forfeit all unapplied fees paid to SIF Language School at that time and or the sum of $500 additionally, in SIF Language School’s sole discretion.

Parent/Guardian Consent and Approval

I represent and warrant that I am over the age of eighteen years and the parent or legal guardian of and have the legal capacity, requisite authority, and right to contract for the individual whose name appears below. I have read and fully understand the meaning of these policies. For good and valuable consideration, the receipt and sufficiency of which I hereby acknowledge, and on behalf of the aforesaid individual and myself, I hereby consent to and approve the terms and conditions of the above policies and I acknowledge they will be binding upon me and the aforesaid individual, jointly and severally.

Printed Name: ___________________________  Signature: ___________________________

Date: __________________ Name of individual for whom I have authority to contract: ___________________________