

INSTRUCTIONS Three (3) Pages Total
Print This Form, Fill it out and Fax to 1-877-726-9092

Bailspeak – DOI Approved
Pre-Licensing &
Continuing Education
Bail Education

1852 West 11th Street #412
Tracy, CA 95376-3736
1-877-726-9092
registrar@bailspeak.com

- Information is for internal use only and will not sold to third parties
- Asterisks Indicates California Department of Insurance Required Information; you may omit your social security number for courses that are NOT California Department of Insurance approved
- One form for each attendee is required
- Call or check www.bailspeak.com for schedule of available courses before submission

REGISTRATION & TERMS OF AGREEMENT

*Printed Full Legal Name: _____

*Social Security Number: _____

CA Bail Insurance Agent License Number (Bail Agents Only): _____

Full Street Address: _____

City, State & Zip Code: _____

Best Contact Phone Number: _____

Email (Please Print Clearly): _____

City Class will be Attended: _____ Dates to be Attended: _____

I, _____, understand that by signing below the following
Student's Printed Name

description and selection of course or courses that I am over the age of 18 and agree to the conditions contained hereafter:

3-DAY BAIL AGENT PRE-LICENSING/PC 1299 COMPLIANT COURSE TO BE ATTENDED

<u>Course Title</u>	<u>Tuition</u>	<u>Initial Selection</u>
Pre-Register Bail Agent Pre-Licensing 10 Plus Days From Class Date with Tuition	\$560.00	_____
Pre-Register Bail Agent Pre-Licensing Within 10-Days of Class with Tuition	\$585.00	_____
At the door Bail Agent Pre-Licensing	\$650.00	_____
3rd Day Bailspeak Bounty Hunter Alumni 8-Hours	\$185.00	_____
Seat Security Deposit (Non-Refundable)	\$150.00	_____

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Please Note: A Registration Form Without Tuition Does Not Waive Registration Time Limits.

METHODS OF PAYMENT

STUDENT CREDIT CARD AUTHORIZATION

Mastercard _____ Visa _____ American Express _____ Discover _____ PayPal _____

Full Name on Card: _____

Billing Address **Including Zip Code**: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

**THIRD PARTY CREDIT CARD INFORMATION – IF PAID VIA PAY PAL LIST
TRANSACTION NUMBER AND STUDENT ATTENDING CLASS**

Mastercard _____ Visa _____ Discover _____ PayPal _____ American Express _____

Print Exact Name on Card: _____ 3-Digit Security Code: _____

Card Billing Address: _____

Printed Number, Street, Apt, City, and Zip Code

Card Expiration Date: _____ or PayPal Transaction ID Number: _____

Third Party Cardholder Authorization Statement: I _____ do hereby
Printed Name on Card

authorize _____ to charge _____ for Bail Agent Pre-Licensing as described above
Printed Name of Authorized Person Amount

Signature of Card Holder Date

Date Signed

MAIL IN PAYMENTS

Mail this completed form with payment for tuition to the Payment Processing Center as follows:

Bailspeak
PO Box 1265
Valley Springs, CA 95252

Please allow 14 business days to process your submission.

PAYMENT AT THE DOOR

Bailspeak will accept cash, money order, company check, company credit card, and student's personal credit card. **Personal checks will not be accepted.**

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Applicable certificates for students who pay at the door will be mailed to the student within 10 business days subsequent to completion of attended class.

REFUND POLICY

Bailspeak will refund tuition in full upon written notice of cancellation that is received by email or fax 20 business days prior to the first date of the class that has been pre-registered for above. Students may roll over submitted tuition to the same class one time only. This does not waive the original deadline of the first class.

The \$150.00 Seat Security Deposit to guarantee your seat is fully earned and is non-refundable.

Late Students may be turned away and roll over to the same future class one time. You must be on time to receive credit for this Department of Insurance Approved Course.

Any and all received payments shall be deemed fully earned when a student completes any course or fails to attend without providing written notice of cancellation as described above. Student agrees not to charge back credit card payments pursuant to this understanding.

HOLD HARMLESS & WAIVER OF LIABILITY

Student identified above (hereafter called "First Party") hereby releases and forever discharges Bailspeak: Pre-Licensing & Continuing Bail Education (hereafter called, "Second Party" and their/its director, owner, owners, instructors, agents, executors, administrators, assigns, and successors in interest of and from any and all claims, demands, damages, causes of action(s), and debts whatsoever, in law or in equity, which, may or may not occur either directly or indirectly, through the course of attending class lectures, participating in physical training of any kind from any future claim or claims whatsoever.

First Party and his/her/ their heirs, spouse, former spouse(s), legal representatives, assigns and anyone else claiming under him/her/ them family, friends, relatives, business associates, or any other person or entity shall not, in any way, hold future claim, whatsoever in reserve for any injury, physical or emotional, that First Party now has, had or may hereafter have, whether known or unknown, suspected, for, upon or by reason of matter, cause or thing whatsoever.

First Party understands that this is intended as a full and complete waiver of liability of any and all claims hereinabove described.

First Party voluntarily and knowingly executes this waiver of liability below with the express intention of eliminating Second Party from all claims, known or unknown that have arisen or may arise from any and all occurrences including but not limited to training undertaken anywhere in the United States of America.

By signing below, Student and third party cardholders each acknowledge reading and understanding the terms & conditions set forth herein in totality and agrees that by executing his or her signature below that this agreement is legally binding with dispute resolution venue to be in San Joaquin County, California.

Signature of Student

Date

Signature of Third Party Card Holder

Date