



UNITED CREDIT EDUCATION SERVICES

Enrollment Application

Mail To: United Credit Education Services, PO Box 130, Farmington, MI 48332
Fax: (248) 848-9140 E-mail: customersupport@united-credit.org

Social Security # _____ Date of Birth _____
Mr Ms First Name _____ Last Name _____ Middle Ini. _____
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: \$499.00

Please see next page for Payment information of \$499 Split Payment Options.

Be sure to indicate the payment plan that you prefer.

****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 United Credit Education Services. 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: _____



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Split Payment Option

Please select the appropriate payment option. As per your selection on 2nd payment, United Credit Education Services payment processing department will charge your account as indicated above.

Sale Amount	Payment Option	First Payment	Second Payment	Total Payment	Office Use Only	
					Initial Payment Date	
\$499	30 days	\$250	\$260	\$510		
\$499	60 days	\$250	\$275	\$525	Second Payment Date	

Split Payment Billing Option: Please select the appropriate payment method.

Credit Card Information



Card Holder Name:						
Credit Card Number:		Exp. Date:		CVV:		
Billing Address:						
City:		State:		ZIP Code:		

Checking Account Information

Checking Account Holder Name:		Check Writer Fed ID # or SSN:	
Routing #:		Account Number:	Check #:
Billing Address:			
City:		State:	ZIP Code:

I hereby authorize American Credit Education Services to deduct my membership fee from my credit card or checking account as per the instructions indicated above.

Print Full Name _____

Signature _____ Date _____



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Terms and Conditions of Enrollment

1. **United Credit Education Services, "UCES,"** is a credit union services organization which is an affiliate of a federal credit union and is primarily engaged in providing financial education services and products for the benefit of the affiliated credit union, its membership, the membership of non-affiliated credit unions contracting with UCES, and to prospective credit union members.

UCES 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 AND PRODUCTS PURCHASED BY A CONSUMER ARE PERFORMED BY EMPLOYEES OF UCES.

2. Applicant agrees as follows:

- To promptly provide **United Credit 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, **United Credit 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 **United Credit 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 **UCES**, 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 **United Credit Education Services, Inc.** through the completion of three (3) dispute cycles. Applicant agrees to send all correspondence received from the credit agency to **United Credit Education Services**. After the completion of three (3) dispute cycles, if Applicant is not satisfied, Applicant may request a refund 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 during the time Applicant was enrolled in the services of **UCES**. 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 5 sets of dispute letters. The length of service is approximately 11 months.

4. If paying by check, your check may be electronically deposited.

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

Dispute Resolutions. If a dispute arises 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 **United Credit 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 **United Credit Education Services, Inc.**, PO Box 130, Farmington, MI 48332. There is no penalty for cancellation. If you cancel, you will receive a full refund of the entire payment made to **United Credit 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 _____



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Please Notice!

The following documents are required by the credit reporting agencies. United Credit 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: United Credit Education Services

PO Box 130, Farmington, MI 48332

E-mail: customercare@united-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