

Name (Please Print): _____

Email Address: _____

- 1) I understand that I am receiving an extension for select enrollment items including my health clearance and/or passport copy and that I am responsible for submitting these missing items by **January 6, 2020**.
- 2) I understand that if I do not already have a passport that is valid 6 months beyond the end date of the program, I am **required** to use the expedited passport application process, which will cost an additional fee and takes 2-3 weeks. See the U.S. Department of State website for details:
<https://travel.state.gov/content/travel/en/passports/get-fast.html>.
- 3) I understand that if I do not submit these items by **January 6, 2020**, I will NOT be permitted to participate in the program but will remain liable for fees according to the [Quarter Abroad Cancellation Policy](#) or [Seminars Abroad Cancellation Policy](#).
- 4) I understand that by submitting my enrollment, I will be enrolling in my designated program (according to first-completed, first-reserved policy) and that I am responsible for the fees. I understand that even if I cancel prior to January 6, if it is on or after December 14, I will already be liable for the non-refundable \$300 deposit and 50% of the Accommodations and Services Abroad Fee (or more fees, according to the [Quarter Abroad Cancellation Policy](#) or [Seminars Abroad Cancellation Policy](#)).

By signing this contract I acknowledge that I have read the Fast-Track Enrollment Request Form and fully understand its terms, and that I agree to comply with the terms in this contract.

➡ _____

Participant Signature **Date**