**CUSTOMER’S RIGHT TO CANCEL**

(enter date of transaction)

You may cancel this transaction without any penalty or obligation, within three business days from the above date (Saturdays, Sundays, and holidays are not business days)

If you cancel, any property traded in, any payments made by you under the contract or sale, and any negotiable instruments executed by you will be returned within 10 business

days following receipt by the seller of your cancellation notice, and any security interest

arising out of the transaction will be cancelled.

If you cancel, you must make available to the seller at your residence, in substantially as good condition as when received, any goods delivered to you under this contract or sale;

or you may, if you wish, comply with the instructions of the seller regarding the return shipment of the goods at the seller’s expense and risk.

If you do make the goods available to the seller and the seller does not pick them up within 20 days of the date of your notice of cancellation, you may retain or dispose

of the goods without any further obligation.

To cancel this transaction, mail or deliver a signed and dated copy of this cancellation notice or any other written notice, or send a fax to:

--------------------------**INSTITUTE OF DENTAL ASSISTING**----------------

(name of seller)

at------------------------**8215 Greenway Blvd. Suite 100, Middleton, WI 53562**

(address of seller’s place of business)

Not later than midnight of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date)

Note: Purchase of educational goods and services offered by a school is deemed to take place when written and final acceptance is communicated to the student by the school.

If the representative who enrolls you is authorized to grant written acceptance at the time you enroll, and does so, the cancellation period does not end until midnight of the third

business day after the day you receive written acceptance by certified mail from the school.

I hereby cancel this transaction.

(Buyer’s Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date) (Buyer’s Name-Print)

(Street Address)

(City, State, Zip Code)