

Welcome! Please read these Remodel Health Member Decline Form (the "Decline Form") carefully because they serve as an agreement between You ("You" or "User") and Remodel Health Holdings, Inc. dba Remodel Health and its affiliates and subsidiaries ("Remodel Health", "We", or "Us") regarding all products and services offered by Us to You.

General

You are declining the services offered to you by Remodel Health as outlined in the Terms of Use and the Member Terms.

Dispute Resolution

All disputes arising from or related in any manner to Remodel Health's products and services or the business relationship between You and Us which cannot be resolved by mutual agreement shall be submitted to binding arbitration in accordance with the JAMS Comprehensive Arbitration Rules and Procedures and shall take place in Marion County, Indiana, or another location agreed to by the parties. Judgment on any award rendered by the arbitrator(s) may be entered in any court of competent jurisdiction. Claims will be arbitrated only on an individual basis. You and Us agree to and hereby waive any right to join or consolidate claims in an arbitration or court action by or against one another, other individuals, or entities to pursue, on a class basis, any dispute; provided however, that if an arbitrator or court of competent jurisdiction determines that such waiver is unenforceable for any reason with respect to a particular dispute, then the parties agree that such dispute shall be decided instead in a court of competent jurisdiction in Marion County, Indiana. You and Us agree that arbitration is the only litigation forum for resolving covered claims, and that both parties are waiving the right to a trial before a judge or jury in federal or state court in favor of arbitration. The parties agree that this provision is subject to, and shall be interpreted in accordance with, the Federal Arbitration Act, 9 U.S.C. §§ 1-14.