

Mexicali, B. C. January 22, 2009

INSTITUTO EDUCATIVO DEL NOROESTE A.C.  
CALZADA CETYS S/N  
COLONIA RIVERA  
MEXICALI, B.C.

MATTER: RE-USE OF THE MAJOR MEDICAL EXPENSE INSURANCE

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I hereby wish to voluntarily inform you my decision of not joining the Major Medical Expense Insurance that the institution hires for the students. At the same time I waiver the Instituto Educativo del Noroeste, A.C. (Northwestern Educational Institute, Civil Association) of any responsibility in case I suffer an accident inside or outside its Facilities at any event carried out, if it is or it is not sponsored by the Institution.

Yours Truly

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Student Enrollment

No. 021538  
Name: VALENZUELA ANCHONDA DANIELLA  
Insurance Co: BANCOMER  
Policy No: 881083023480406  
Certificate: 001257698 03