

**CONSENT TO JOIN ACADEMY MORTGAGE OVERTIME LAWSUIT**

I consent to join this lawsuit for unpaid overtime against Academy Mortgage Corporation (“Academy”) under the Fair Labor Standards Act (“FLSA”) regarding hours worked in a Mortgage Loan Processor or Processor I position at an Academy location.

I hereby designate the Representative Plaintiff(s) as my agent(s) to make decisions on my behalf concerning this FLSA overtime case against Academy, including conducting this litigation, settlement negotiations, and all other matters pertaining to these claims against Academy. I understand that if I file this consent, I will be bound by the decisions made and agreements entered into by the Representative Plaintiff(s) and Class Counsel.

I understand that the Representative Plaintiffs have entered into a contingency fee agreement with the law firm of Head Law Firm, LLC (“Class Counsel”), which applies to all plaintiffs who file this consent, and by filing this consent I agree to be bound by such contingency fee agreement. I understand that I may obtain a copy of the contingency fee agreement by requesting it from Class Counsel.

I acknowledge that I will be bound by any judgment or any settlement reached between the Representative Plaintiff(s) and Academy. I understand that I will be entitled to share in any class recovery, but if no monetary judgment or settlement is obtained, I will receive nothing.

I agree that this consent may be filed in any overtime case against Academy, whether in this case or a subsequent suit in any court or forum that may be filed on my behalf.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION:**

**This information will not be made part of any public record and is for your attorney's eyes only, as necessary for your attorney's files for litigation and possible settlement purposes.**

Full Name: \_\_\_\_\_

Job Title(s) at ACADEMY MORTGAGE During Last 3 Years and Dates of Employment:  
\_\_\_\_\_

Any other Name(s) used or known by: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

Evening Telephone: \_\_\_\_\_

Cellular Telephone: \_\_\_\_\_

Personal E-Mail Address: \_\_\_\_\_

Return this form with your signed Consent by fax, email, or mail to:

C. Andrew Head  
HEAD LAW FIRM, LLC  
Suite 305  
1170 Howell Mill Rd., NW  
Atlanta, GA 30318  
Telephone: (404)924-4151  
Facsimile: (404)796-7338  
Email: [jgardner@headlawfirm.com](mailto:jgardner@headlawfirm.com)