CPT ID:
Passcode: <<Passcode>>

OPT-IN CLAIM FORM

I read the Notice Regarding Unpaid Overtime Settlement with Betacom.

I consent to join *Lay v. Betacom Holdings, Inc. et al.* and participate in the settlement.

I agree to be represented by Josephson Dunlap, LLP in this matter.

In exchange for payment under this settlement, I agree to be bound by the Court's Order in this case and the release of claims in the Settlement Agreement, and release Betacom and its related entities from all federal, state and local and common law wage and hour actions, causes of actions, demands, damages, attorneys' fees, costs, loss of wages, interest, including but not limited to those that arose or are in any way related to improper classification, failure to pay wages, failure to pay for meal/rest breaks, failure to pay overtime and/or premium rates, failure to provide timely and accurate wage notices, failure to provide timely and accurate wage statements, or otherwise relate to scheduling, payment of wages and/or overtime, and failure to timely pay wages, and any other relief permitted to be recovered on, related to, or in any way growing out of any claims in the Lawsuit regarding events that occurred or are alleged to have occurred from August 6, 2021 through August 8, 2025.

_____
Signature

_____
Date

_____
Full Name (print)

_____
Street Address

_____
City State Zip Code

_____ _____
Cell Phone Number Email Address

_____
Date of Birth

Please return this form by mail, email, or fax to:

Lay v. Betacom Holdings, Inc.
c/o CPT Group, Inc.
50 Corporate Park
Irvine, CA 92606
Fax: 949-419-3446
Telephone: 1-888-400-1825
Email: LayBetacomHoldingsSettlement@cptgroup.com
Website: www.LayBetacomHoldingsSettlement.com

Your Consent to Join Settlement Form must be received by December 17, 2025, or you lose your right to participate in this Settlement.