

2011 SCHOOL YEAR ENROLLMENT FORM for LINDA EDGAR'S TUTORING SERVICE

3613 N. 45th Place Phoenix, AZ 85018 | 602-795-6312

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To reserve a space for your child, please send in \$30.00 per hour for 3 to 1 ratio and \$50 an hour for 1 to 1 ratio, as a **NON-REFUNDABLE DEPOSIT** that will be applied towards last four scheduled sessions, along with the enrollment form, and a signed contract of policies to me as soon as possible.

STUDENT _____ **GRADE** _____ **SUBJECT** _____

SCHOOL _____ **TEACHER** _____

MOTHER _____ **hm. phone** _____ **wk. phone** _____

ADDRESS _____

E-MAIL _____ **CELL** _____

FATHER _____ **hm. phone** _____ **wk. phone** _____

ADDRESS _____

E-MAIL _____ **CELL** _____

1st CHOICE DAYS _____ **TIME** _____

2ND CHOICE DAYS _____ **TIME** _____

I HAVE READ AND ACCEPT ALL THE POLICIES OF LINDA EDGAR'S TUTORING SERVICE. I AGREE TO BE RESPONSIBLE FOR PAYING THE TUITION FOR ALL SCHEDULED SESSIONS FOR

_____.

(Student Name)

_____ **DATE** _____

(Signature of parent or responsible party)

(Printed name of parent or responsible party)

Please complete only if someone other than one of the parents is responsible for the tuition payments

Name _____

Address _____

Phone _____ **work phone** _____

Cell phone _____ **e-mail** _____