



Family Information (Please Print):

Parent or Guardian's Name: _____

Student Name: _____ Date of Birth: _____ Age: _____ Grade: _____

School: _____ Student's Cell (If applicable) _____

Parent Phone (Home) _____ (Work) _____ (Cell) _____

Address: _____

E-mail: _____

Emergency Contact (Name) _____ (Relationship to Student) _____

Phone (Home) _____ (Work) _____ (Cell) _____

Person Responsible for Payment:

Name: _____ Phone: _____

* E-mail Address (if different from above): _____

* Billing Address (if different from above): _____

Tutoring Fees: Annual Registration Fee \$60.00, Individual Tutoring \$60.00 per hour

By signing below, you agree to the following Terms and Conditions:

- 1) Payment of fees: The first month's tuition is due upon the signing of this agreement. Thereafter, you will be billed monthly in advance for the monthly fees. Payments are due in advance for the services to be rendered during that month. Collection fees, including reasonable attorney's fees and expenses, may be charged for overdue payments, insufficient funds, or monthly collection by an outside agency.
- 2) A two-week notice is required when discontinuing tutoring.
- 3) We realize schedules change and unforeseen circumstances arise. If a conflict arises with the existing schedule, YOU MUST CALL THE OFFICE 24 HOURS IN ADVANCE AND SPEAK WITH JOHN OR DEBORAH ESTEP to try and reschedule a session. TUTORS FOCUS ON TUTORING ONLY AND DO NOT HAVE ACCESS TO CHANGE THE SCHEDULE. If you are tutored on Saturday or Sunday, you MUST CALL THE OFFICE BY THURSDAY AT 5:00 PM OF THAT WEEK. Rescheduled sessions must be completed within two weeks or you will be charged for the session.
- 4) By signing I agree to the above conditions and that I will pay the fees shown above. We understand that all payments must be received in advance by the 5th day of each month or the day of the first tutoring session, whichever comes first.

Parent Signature _____ Date _____