



QUEST ACADEMY

REGISTRATION FORM

Child's name: _____ M _____ F _____ D.O.B. _____

Age: _____ Grade: _____ School: _____ School Start Date: _____

Requested days/times _____

Subject area with greatest need _____

Days/times unavailable _____

Mother's name: _____ Home Phone: (_____) _____

Home Address: _____ Work Phone: (_____) _____

*E-mail Address: _____ Cell Phone: (_____) _____

Father's name: _____ Home Phone: (_____) _____

Home Address: _____ Work Phone: (_____) _____

*E-mail Address: _____ Cell Phone: (_____) _____

_____ Check here if you wish to enroll in auto debit. Your account will be debited on the last session of your current package to reserve your spot for the following month.

CC # _____ Exp. Date _____

Registration Fee

Please read an initial each of the following policies:

_____ I hereby release, acquit and agree to hold harmless, Quest Academy, it's agents, instructors, successors, and assigns, from any liability or claims of any kids whatsoever, resulting or arising from my participation in any programs, classes, camps or any other function otherwise offered or sponsored or participated in by the Academy, including, but not limited to, the participation therein by my child(ren).

_____ Because our schedule is extremely tight, please arrive on time to pick up your child. I understand that emergencies arise at times, but there will be a \$10 late charge for students left in excess of 10 minutes unless previous arrangements have been made.

_____ Homework and Tutor students pay for each class they attend. If you have a private tutoring session scheduled and you are unable to make it, please give us 24-hour notice when possible. If your child wakes up ill, please e-mail me first thing in the morning so that I can release your slot. *All no-shows will be charged full tutoring fee for that session. On occasion, your student may work with a different tutor.*

_____ I will allow my child's name and/or photo to be used on the website or printed materials in recognition for outstanding awards.

_____ If cancellations become excessive, your child may have to be removed from his/her spot and placed in a different time slot. *I also understand that to gain the most benefit from tutoring, regular attendance is necessary.*

Financial agreement

There will be a \$25 fee for any returned checks.

All invoices will be processed on the last session of each month. Total fees will be calculated based on the number of sessions that month, and will be adjusted to accommodate for planned vacations or holidays. **Payments will be due on the last session of each month to reserve your spot for the upcoming month. You will be charged a \$10 late fee, if not received by that date. It is our policy that all sessions be prepaid.** Thank you for understanding these rather strict guidelines. We often have a waiting list, and these policies help ensure I can service as many students as possible.

_____ I understand and accept these new financial stipulations.

_____ I have received a copy of Quest's policies for my file.