



Staff use only: Date Received: _____
Enrolled Class: _____
Bill Date: _____ Amount: _____



### ENROLLMENT FORM

*Tell us about You! ("Responsible Party")*

Your Name (**not** your child's name!): \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

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

Phone (H): \_\_\_\_\_ Phone (Cell): \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Alternative Emergency Contact Person: \_\_\_\_\_ Phone (Cell): \_\_\_\_\_

*Tell us about your FasTrackKid! ("Student")*

Last Name of your FasTrackKid	First Name of your FasTrackKid	Age	DOB	Gender
			/ /	M/F

Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_ School Schedule: \_\_\_\_\_

Any siblings?

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

How did you hear about FasTrackKids??: \_\_\_\_\_

### Semester Program (20 weeks) – January 30<sup>th</sup> – June 16, 2012

#### Choose your program(s)

**FasTrackKids Core Jrs. or Srs. (ages 3.5 – 7)– 2 hours per class: 1 class per week**

Semester: \$1700 for 20 weeks (\$42.50/hr of instruction)

**PRESCHOOL ALTERNATIVE Combines Preschool with Academics! (please circle your choice)**

**FasTrack Discoverers (ages 3 – 5) – 2.5 hours per class: 1, 2, 3, or 4 classes per week.**

	1x/week	2x/week	3x/week (add \$1000)	4x/week (add \$1000)
20 Week Semester	\$2,125 (\$42.50/hr)	\$3,750 (\$37.50/hr)	\$4,750 (\$31.66/hr)	\$5,750 (\$28.75/hr)

**The E.nopi Math and Reading Advantage (ages 3.5 -12) –1 hour sessions: 1 or 2 hours per week**

**1 hour per week**

Semester: \$1170 for 20 weeks (\$58.50/hr of instruction)

**2 hours per week**

Semester: \$2125 (\$53.12/hour of instruction)

**NEW!! Handwriting Without Tears (ages 3 – 5) – Half hour sessions: 1 class a week**

Semester: \$760 (\$38/session)

#### Choose Your Location:

Upper East Side  Upper West Side

#### Indicate your Day and Time preference for your class or classes:

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

## Your Payment Information

VISA / MC CARD/ DISCOVER

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EXPIRATION DATE: MMY

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Full payment upon enrollment     Monthly installment payment plan (add \$75 administration fee)

If I choose the Monthly installment payment plan, I agree to be automatically charged on the 1<sup>st</sup> of every month.

Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_

## Additional Information, Terms & Conditions

**Allergies, Dietary Restrictions, Behavioral Issues or Medical Conditions:** please describe any and all of the following:

Allergies	
Dietary restrictions	
Behavioral/ Developmental Issues/ Delays	
Medical conditions	

Unless this section above indicates otherwise to the contrary, we will assume that Student can consume normal snacks & engage in normal activities for child in Student's age group. FasTrackKids is not authorized to give medication to your child.

**Pickups:** please list only the people besides yourself that are allowed to pick up your child. If the person on this list did not bring Student to the center, that person will be asked to show ID (this is for the wellbeing of your child and so there are no exceptions)

Name	Relationship	Phone #s (cellular phone)

**Makeups:** If a student is unable to attend a class as a result of travel, schedule conflict, illness, or any other reason, the student is encouraged to make up the class at his/her convenience (subject to availability). However, make-ups must be completed by the end of term. We are closed for the following holidays: Labor Day, Columbus Day, Thanksgiving (Thursday, Friday & Saturday), the week between Christmas Day and New Year's Day, Martin Luther King Jr. Day, President's Day, Good Friday/Easter, Memorial Day and Independence Day. I acknowledge that if my student's class falls on any of these holidays, it is my responsibility to arrange for a makeup class (availability permitting). As a courtesy to other enrolled families and prospective enrollees, please make an effort to notify us in advance of your child's absence. If we do not have advance notice of your child's absence your session may be forfeited and ineligible for a makeup class.

**Cancellations & Refunds:** We make staffing arrangements and other provisions upon enrollment of your child. Therefore, we regret that we cannot offer refunds in the event of your child's withdrawal from our classes. However, we do understand that sometimes a withdrawal is unavoidable. In that case, the unused portion of the tuition will remain on file as a credit to be used within one year from the date of the withdrawal.

**Videotaping & Photographs:** I agree that Student may be videotaped, filmed or photographed during classroom activities for purposes of emailing such videos to myself and anyone else that I specifically authorize. I agree that photographs and videos may also be used for online and print marketing for FasTrackKids and Enopi.

**Emergency Consent:** I acknowledge that it is the policy of FasTrackKids to notify a parent when a child is ill or needs medical attention. I acknowledge that if FasTrackKids cannot contact a parent and they need to get immediate help for the child, the procedure is to take the child to the nearest emergency service or call 911/ambulance help. I hereby consent to this procedure and further agree to pay all costs incurred.

I hereby state that the above information is accurate and I understand and agree to all of the terms and conditions set forth above.

Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_