

Star Learning Center

P.O. Box 12041, Burke, VA 22009-2041

Email: star2learn@yahoo.com Web: <http://www.starlearningcenter.org>

Student Information		
Student Name:	Age:	Grade:
School:		
Home Address:		
City	State	Zip
Day Phone:		Evening Phone:
Email:		
Emergency Contact:		Emergency Phone:

Registration Information (2010)		
One-time non-refundable fee: \$30		
1. TJ Preparation: 10 4-hours sessions (Saturday Morning)		
1.1. English	Tuition: \$475	
1.2. Mathematics	Tuition: \$475	
1.3. English and Math	Tuition: \$830	
2. TJ Preparation: 10 4-hours sessions (Saturday Afternoon)		
2.1. English	Tuition: \$475	
2.2. Mathematics	Tuition: \$475	
2.3. English and Math	Tuition: \$830	
	Processing Fee	\$30
	Total	

Emergency Care and Consent to Enroll	
<p>During the enrollment of the student, the Star Learning Center has my permission to take the student to the emergency room of the nearest hospital when I can not be reached in an emergency situation. I relieve the center of all responsibility in case of accidental or injury during all activities. I also understand that the student may be disciplined if breaches of rules and regulations occur. I assume all responsibility for damage to center property brought about by the student. It is my responsibility to drop off and pick up the student on time.</p> <p>Cancellation Policy: Withdrawal before the first class: Full refund (\$30 processing fee will be charged) Withdrawal after the first class: 80% of Full tuition. No refund after the second class.</p> <p>Parent/Guardian Signature: _____ Date: ____/____/2010</p>	
<ul style="list-style-type: none"> • Seat is guaranteed only if tuition is paid in full. • Make check payable to: Star Learning Center, P.O. Box 12041, Burke, VA 22009-2041 	

Star Learning Center Use Only		
Payment: \$	Check number:	Bank Name:
Received By:	Date:	