

| Student Information | |
|--|--|
| Name of Student | MALE FEMALE |
| Date of Birth | (MM/DD/YY) |
| Child lives with | Father Mother Both Guardian |
| Name of School | Grade |
| Name of Student | MALE FEMALE |
| Date of Birth | (MM/DD/YY) |
| Child lives with | Father Mother Both Guardian |
| Name of School | Grade |
| How did you hear about TOP Learning Center? Referral by _____ Walking by _____ Mailer/Flyer _____ TV _____ Radio _____ Newspaper (which one) _____ Other _____ | |
| Parents Information | |
| Father's Name | Home Phone: |
| Address | Street |
| | Apt # |
| | City |
| | State |
| | Zip code |
| | Work phone: |
| | Cell Phone: |
| Mother's Name | Home Phone: |
| Address; If different than father's | Street |
| | Apt # |
| | City |
| | State |
| | Zip code |
| | Work Phone No. |
| | Cell Phone: |
| Email Address | |
| Emergency Contact Name & Phone No. | Relationship |
| Doctor's Name: | Phone No. |

Acknowledgment of Enrollment

1. Monthly fee and Registration fee.

- A. Registration fee is due at the time of enrollment.
- B. Monthly fee is due in advance, by the end of each month for services to be rendered the following month.
- C. Once the student attends one class session, the monthly fee is non-refundable.
- D. If student returns to TLC within 6 months, the registration fee is waived. If the student does no return within 6 months, he/she is considered "discontinued" and required to pay another registration fee for reentrance.
- E. The above rules apply when the student when the student transfers to another TOP Leaning Center.

I have read and agree to the terms listed in the above "Acknowledgement of enrollment".

Signature of Parent/Guardian

Date

