



Registration Form

Student Information

Student Name: _____ DOB: _____
Last First M.I.

Parent/ Guardian's Name: _____ Date: _____

Mailing Address: _____
Street/ P.O. Box City State Zip

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Name: _____ Phone _____

Student Academic Information

Student Age: _____ Current Grade: _____ School currently attending: _____

Homeschool Organization and Advisor: _____

Please tell us about any academic concerns: _____

Please tell us about any academic strengths: _____

Is your child currently receiving additional services? _____

Academic Intervention: _____ If yes, what subjects? _____

Special Education: _____ If yes, what types of services? _____

For Academic Classes, please provide us with a copy of your child's recent Report Card, SBA Scores and/ or Individualized Education Plan (IEP). This information will help us better meet your child's educational needs.

Health Concerns

Allergies: _____

Medications: _____

Additional Information: _____

Please note additional services/ courses we could offer that could enrich your child's educational experience:

How did you hear about us?

Radio _____ Newspaper _____ Internet _____ Friend _____ Other _____

Late Pick-up Policy:

We at The Study pride ourselves on our small school size, which allows us to provide a holistic, quality education. However, our small size does not allow for additional staff to provide child care services.

We understand that emergencies can happen, however in order to prevent chronic late pickups we have decided to implement the following late pick-up policy for the coming 2018-2019 school year. We allow a 10-minute grace period for parents who may occasionally run late. In the event that a parent/guardian cannot pick up their child on time, The Study should be notified as soon as possible. By 10 minutes after your child's appointment is scheduled to end, all children are expected to have been picked up by a parent or guardian.

Parents or guardians arriving 15 minutes late or later will be charged an additional per-child group tutoring rate in 30-minute increments. Our current group tutoring rate is \$20 per half hour. The late fee will be added to your student's invoice and billed on a monthly basis.

Connections and IDEA will not pay for late pick-up fees.

Billing Information:

The Study bills at the beginning of each month for the previous month's services. An invoice will be sent to you via mail and/or email. Timely payment is expected in order to continue services. For courses and workshops with a set fee, the entire amount will be billed at once. A deposit may be required to reserve the student's spot. Students will not receive a discount or refund for missed classes and are expected to make up any missed work. Students eligible for academic credit will not receive a transcript until the course or workshop is paid for in full.

For tutoring and lessons, a **24-hour cancellation notice** is required, or you will be charged for the session. Extenuating circumstances will be taken into consideration. We use an online appointment management program called AppointmentPlus, and the student should receive an email reminder for tutoring and piano appointments. This service is meant as a courtesy, and if an email reminder is not sent the student is still expected to be present for scheduled appointments. Questions or changes to appointments can be made by calling The Study at 907.262.6227 or emailing thestudysoldotna@yahoo.com.

Connections students: The Study is a vendor with Connections and can bill directly for services provided. Connections requires all paperwork to be submitted **2 weeks prior** to beginning a class or service. Any service or class provided before the 2 weeks must be paid out of pocket by the student, then submitted to Connections for reimbursement.

IDEA students: The Study is a vendor with IDEA and can bill directly for services provided. Students should check with their advisor to make sure the appropriate funds are available. IDEA will not pay for services or classes until **after** the class has been completed. If the student does not have sufficient funds to pay for their balance, the student is obligated to pay the difference out of pocket.

I have read the above late pick-up policy and billing information, and understand that I will be held financially responsible for all services, classes, and materials received by the student.

Parent/Guardian Printed Name

Parent/Guardian Signature

Date