



**TUTORING
LOWER/UPPER ELEMENTARY
MIDDLE & HIGH SCHOOL
REGISTRATION CONTRACT
2011 - 2012**

Student Name _____ DoB _____ M/F _____

School _____ Teacher's name _____ Grade _____

Teacher's contact # and/or email _____

Text Book (if avail.) _____ Level _____

Student Home Address _____

City _____ Zip _____

Home Phone _____ Cell Phone (parent) _____

E-mail Address (parent) _____

Mother's Name _____ Work Phone _____

Father's Name _____ Work Phone _____

Referred By _____

Session Schedule

(To be determined by French For Fun)

Days: M - T - W - Th - F - Sat - Sun Time _____ Instructor _____

We appreciate your business and feel confident your student will make progress in French.

Billing is done ten sessions at a time and is due on the first session.

Our 24 hour cancellation policy is that any changes to scheduling must be made at least 24 hours before the session or that session will be charged as normal, so please make sure to contact the office if your schedule changes: (925) 283-9822 or email at office@frenchforfun.com and put the teacher's name in the subject field. Merci !

Authorized Signature _____ Date _____