Learning Curve Tutoring Center Registration Form

To Be Comple	ted by <i>Tutor</i>		
Start Date	Tutor	Days/Times	Subject
To Be Comple	ted by <i>Parent</i>		
Name of Studen	t		_
Age Grad	de School		_
Name of Parent			
Street	City	State Zip_	
(please print clea	arly) email address		
Cell Number		Emergency #	
Preference for c	ontact: Cell Tex	xt or Email(check one)	
 All Paym Regular t Occasion Tutor or 0 to be absarrives an here. We A 2-weel All guide 	ency is extremely importents must be made of sutoring is \$40 per clanal, one-time class, or Owner must be contacted. Otherwise, parend the student is not per must respect the tutor of the contice is required if yelines for health and	you decide to discontinue tutoring. safety must be followed by the students.	ing if student is going s unfair if the tutor on gas and time to be
Signature of Par	ent		
friend	_sign on the building	earning Curve (please check one)websiteGoogle acher at school other	