

How Did You Hear About Us?

(Include names/date if possible)

- Mailing _____
- Newspaper Ad _____
- Tutor List _____
- Guidance/Teacher _____
- T&E Student/Parent _____
- Other Student/Parent _____
- Phone Book _____
- Internet Search _____
- Our Website _____
- Our Sign _____



OFFICE USE ONLY	
Class Date	
Instructor(s)	
New score(s)	

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ACT PREP COURSE REGISTRATION

STUDENT INFORMATION	First/Last Name		Nickname?		
	Mobile Phone #		Texting OK (for scores)? Y / N		
PRIOR SCORE(S)	Prior ACT score(s)/date(s)				
	Type of test prep already completed		PLAN (pre-ACT) score/date		
	SAT/PSAT scores/dates				
PARENT / GUARDIAN INFORMATION	First/Last Name (primary contact)		First/Last Name (secondary/alternate contact)		
	Relationship to Student		Relationship to Student		
	Full Address		Full Address (if different)		
	Email		Email (if different)		
	Mobile #		Texting? Y / N		
	Home #		Work #		
	Best Reached? Txt / Cell / Email / Hm# / Work# / Any		Best Reached? Txt / Cell / Email / Hm# / Work# / Any		
POLICIES/ PAYMENTS	<ul style="list-style-type: none"> ▪ A 3% late charge may apply for fees received more than 7 days after due date ▪ 24-hour notice is required for cancellations to avoid forfeiture of paid sessions or extra fees ▪ Cash, checks, Visa/Mastercard accepted; \$25 charged for returned checks; no chargebacks after services rendered ▪ No post-dated/third-party/out-of-state/counter checks; individual's name must be printed on checks ▪ Checks accepted only from individual(s)/business below for which driver's license info is provided ▪ Driver's license information required on file for check payments (for all parties on checks to be used): 				
	License Number		State	DOB	
	Name on License (or write "same as above" if this applies)		Full Name on License (or write "same as above" if this applies)		
	Street Address on Checks (or write "same as above" if this applies)		Street Address on Checks (or write "same as above" if this applies)		
	<p>I have read and agree with the policies of T&E Tutoring in this form and certify the information I have provided. <i>(Policies apply even if unsigned)</i></p>				
CERTIFICATION BY PARENT/ GUARDIAN	_____		_____		
	Signature of Parent or Guardian		Date Signed		