

Student Registration Form
World Views Matter
2016-17
(One registration form for each student)

Student Name _____

Parent Names _____

Street Address _____

City, Zip _____

Student E-mail Address _____

Student Cell # _____

Parent E-mail Address _____

Primary Parent Contact # (Emergency First Call) _____ Secondary Parent Contact # (Emergency Second Call) _____

Backup Emergency Contact Name and Number _____

We plan to pay our student's tuition (check one) _____ annually _____ semester _____ month.

Discount of 10% if annually.

Registration Fee \$40.00 per student/school year (\$55 After August 1, 2016) Make checks payable to **Susanne Johnson, Post Office Box 38214, Dallas, TX 75238**. Last minute questions, call 972-553-7601. Your registration fee enrolls your student, reserves student class slots, and pays for class administration expenses. You pay one registration fee for each student per year, regardless of the number of classes the student takes.

My Student's Class Registrations

Class Name _____

Day _____

Time _____

Annual / Semester/Monthly tuition _____