

Evergreen Academy
Admittance Agreement

Date of enrollment _____

Child's Name/Date of Birth _____ / _____

Start Date/Schedule/Class _____ / _____ / _____

Parent's Names _____

Complete Address _____

Parent's Email(s) _____

Parent's phones _____ (h) _____ (c) _____ (c)

Father's work contact _____ (employer name)
_____ (employer address) _____ (work phone)

Mother's work contact _____ (employer name)
_____ (employer address) _____ (work phone)

Please register my child at Evergreen Academy for the days and class indicated. I agree to pay the sum indicated for the services provided. I have today paid a nonrefundable registration fee of \$130.00.

I understand that scheduling and class placement is always dependent on space availability, child's needs and staff capabilities. I understand that the terms of this Admittance Agreement and all other forms and materials completed by me are subject to the approval of the owners and directors of Evergreen Academy. In the event the services to be provided here under cannot be performed for any reason, all agreements I have entered into shall be null and void.

Parent/Legal Guardian Signature

Date

