

### ALPHARETTA LOCATION: THRIVE BLDG. 44 Milton Ave, Alpharetta, GA 30009

PRIVATE/SEMI-PRIVATE CLASSES

(Please fill-out one form per student, even if they belong to the same family)

| Student's Name:                     |   |   |
|-------------------------------------|---|---|
| Grade Level:                        | Student's Age:  | Student's Birthday:   |
|                                     |   |   |
|                                     |   |   |
| Address:                            |   | City, Zip:  |
| Phone:                              | Parent's email:   | City, Zip:  |
| Emergency Contact:                  |   |   |
| <b>Special Health Consideration</b> | ons:  |   |
|                                     |   |   |
| •                                   | nic, physical, emotional, psychologic   | cal, or mental challenges you have to function through or get                 |
|                                     |   |   |
| ADHD—which could affect the p       | r surgery, headaches, anxiety, sleeping pro<br>reparation for and performance during an e<br>, AP, or CLEP Scores (if any): | blems, OCD, depression, severe allergies, concussion, dyslexia, ADD or exam ) |
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| Neierieu by.                        |   |   |

## **College Application Help**

## **Live or Online Workshops**

# College Application/Scholarship Essays & Admission Workshop

**Reservation Fee**: \$50.00 Due before workshop Orientation & will be deducted from the package once all classes are booked on the calendar. (Please indicate and check your preferred program below.)

☐ **Hourly Rate**: \$67.00 per hour or

☐ **Bulk Rate**: Indicate your preferred package below

| # of Sessions | 1.5 Hours |
|---------------|-----------|
| □ 4           | \$399.00  |
| □ 6           | \$589.50  |
| □ 8           | \$774.00  |

## College Application & Scholarship Assistance

**Reservation Fee:** \$50.00 Due before Orientation & will be deducted from the package once all classes are booked on the calendar.

(Please indicate and check your preferred program)

☐ Hourly Rate: \$67.00 per hour

☐ **Bulk Rate**: Indicate your preferred package below

| # of Sessions | 1.5 Hours |
|---------------|-----------|
| □ 4           | \$393.00  |
| □ 6           | \$580.50  |
| □ 8           | \$762.00  |

PLS. MAIL OR SCAN



## ALPHARETTA LOCATION: THRIVE BLDG. 44 Milton Ave, Alpharetta, GA 30009

PRIVATE/SEMI-PRIVATE CLASSES

(Please fill-out one form per student, even if they belong to the same family)

#### **FEE POLICY:**

- Payment portals can be found through our website at AlmondTreeEducation.com/Enroll
- An invoice will be emailed or texted to you at your request.
- Other payment Apps: VENMO: MrsV@AlmondTree
- Cash and checks are no longer accepted.
- If any family/student chooses to withdraw from the class (or cancel enrollment), a refund for the workshop fee will be issued only if written notice (via email or regular mail) is received 24 hours after the Orientation. However, no refunds will be issued for the reservation fee.



\_\_ (please initial here)

#### MISSED CLASS POLICY:

- Upon registration, the students (and their parents/guardians who enrolled them) assume responsibility for attendance, and the enrolled student is expected to attend every class meeting.
- Students are responsible for planning their schedules to avoid excessive conflicts with course requirements.
- Classes CANNOT be made up unless,
  - o Cancellation is communicated at least 24 hours in advance.
  - o A proof of absence is provided,
  - o Or in the case of an extreme emergency
- Ultimately, the instructor can decide whether or not to award a make-up class. That being said, accommodations for make-up classes are **not guaranteed**.
- If a student is going to miss a class that he/she cannot make up, the student will still be expected to complete the missed coursework during their absence.
  - o Because of the rigor and speed of the review schedule, accommodations for makeup work will be highly limited.
- Classes that are made up must be scheduled within the same week as the original class.

\_\_\_\_ (please initial here)

## IMPORTANT REMINDERS:

- 1. Completing 1 to 1.5 hours of homework, four days a week (outside of the review class), is essential to their success in these test-prep sessions; it's *just as important* as the class review. If your child/ren cannot complete assigned work at home please **do not register them**. They will get burned-out.
- 2. As an old saying goes: "Early is on time, on time is late." Please give your student enough time to get to class, get settled, and prepared to work.
- 3. Unless it is an emergency, cell phones are <u>not allowed</u> during class. Social media and online networking will not be allowed while sessions are in progress.
- 4. These review sessions will go by quickly, as we will do many simulated tests. However, we shall have ample breaks in-between. Students are welcome to bring their own refreshments, but please remind your student to minimize distractions.
- 5. Students may **not** bring weapons, alcohol, drugs, or tobacco products to the premises.
- 6. Please observe proper attire. No undergarments displayed, please.
- 7. For homeschooled students, each student will receive a grade (based on their class tests) and 0.5 credit once the session is completed.
- 8. The first day of class is Orientation. Please make sure your child communicates what has been covered in class.

\_ (please initial here)

Personal Checks are no longer accepted.

| <ul> <li>I, the undersigned father/mother/legal guardian, agree to the following stipulations:</li> <li>✓ If my student/s missed a class, my student/s and I are responsible for communicating with the instructor and know what is assigned for the next class, if anything is required.</li> </ul> |
|--|
| ✓ I agree to pay the fee/s for the session/s I checked above. I agree with the payment plan stated above.  |
| ✓ During class time, I can be reached at this phone #  |
| ✓ I understand that the evaluation and grade my student will receive is not a pass/fail grade.   |
| I will not hold Caryl Veloso, her substitutes, and Almond Tree Education, LLC. responsible for my student's fina grades or test scores   |
| ✓ I understand, agree, and will abide by all the <i>Policies</i> and <i>Special Note</i> as expressed above.   |
| Please sign, scan, & send your signed  |
| registration form and payment to:  |
| Caryl Veloso: caryl@almondtreeeducation.com  |
| Credit Card Payments: Venmo or Paypal  |

Mailing Address

Thrive Coworking

44 Milton Avenue

Desk 17

Alpharetta, 30009

Signature: Parent/ Legal Guardian

Date: