

REGISTRATION 2011 – TIMOTHY CHRISTIAN H. S.

You may enroll in the test preparation course, *ACT 36*, by completing all the blanks below. Class lists will be posted in the Counseling Center to remind you of your starting date and notify you of your room assignment.

PERSONAL DATA: PLEASE PRINT.

Name: _____ Male: _____ Female: _____

Home Address: Street Number _____

City _____ State _____ Zip _____

Phone: (home) _____ Parent at work: (name) _____ (phone) _____

Parent E-mail address: _____ Student E-mail address: _____

STUDENT COMMITMENT: *I understand that I am making a commitment to attend all sessions and to complete all assignments in order to benefit the most from this course.*

Student's signature _____

PARENT RELEASE: *I authorize my child's school to give ExcelEdge, Inc., a copy of my student's ACT score. I understand that this data will be used only for research and will remain confidential.*

Parent's signature _____

CLASS TIME: Classes are scheduled on Wednesday evenings from 7:00 to 9:00, February 2 through March 23. The Practice Test is scheduled for March 16 from 5:30-9:00.

PAYMENT: Please enclose a check for \$225 made payable to Timothy Christian High School, and turn your completed *ACT 36* Registration in to the Main Office. **Registration begins immediately, and registration closes on December 10. We will guarantee enrollment to students who register by the deadline.** We will not refund tuition after the program begins.

We look forward to giving you the **36** edge.