



ENROLLMENT FORM

CLIENT NAME: _____ DATE: _____

ADDRESS: _____

CONTACT PHONE: _____ DATE OF BIRTH: _____

SCHOOL & GRADE: _____

EMAIL ADDRESS: _____

COMMENTS: _____

Place a checkmark next to your payment option, and total the cost in the “Grand Total” box:

| ✓ | PAYMENT OPTIONS | Price | | Quantity | | Total Cost |
|--|---------------------------------------|---------------|---|----------|---|------------|
| | <i>One Hour</i> | \$15 per Hour | x | 1 | = | \$15 |
| | <i>Two Hours</i> | \$15 per Hour | x | 2 | = | \$30 |
| | <i>Three Hours</i> | \$15 per Hour | x | 3 | = | \$45 |
| | <i>Two Day Bundle (six hours)</i> | \$14 per Hour | x | 6 | = | \$84 |
| | <i>Three Day Bundle (nine hours)</i> | \$14 per Hour | x | 9 | = | \$126 |
| | <i>Four Day Bundle (twelve hours)</i> | \$13 per Hour | x | 12 | = | \$156 |
| Optional Monthly Materials Fee - \$5 <i>Allows usage of our school and craft supplies for a month.</i> | | | Coupon Used? YES NO Coupon Amount: \$_____ | | | |
| YES NO | | | | | | |
| GRAND TOTAL | | | | | | |

Signature: _____ Date: _____

Print Name: _____

To Reserve Your Spot, E-Mail this form to grow@clconnect.com or Fax it to (559) 228-9200