



# Active Reading Clinic

1543 Sunnyvale Ave., Suite 101  
Walnut Creek, CA 94597  
(925) 944-5559

## 2011 Summer Intensive Program

Session I	June 13 – July 1	\$900
Session II	July 11 - July 29	\$900
Session III	August 1 - August 19	\$900

Yes, I would like to register my child/children for the Summer Intensive Program!

Name: Parent(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Student(s) Name: \_\_\_\_\_

Mark one or more:

Session I \_\_\_\_\_ Session II \_\_\_\_\_ Session III \_\_\_\_\_

**Lessons are 50 minutes between the hours of:** (select which hour you'd prefer)

Time: Mornings (9-12am) or Afternoons (12-5pm) \_\_\_\_\_

Enclosed is my deposit of \$200 per session (each child):  
 Check  
 Credit Card

Credit Card: (Circle one) Visa or Master Card:

Credit Card Number: \_\_\_\_\_ exp. date \_\_\_\_\_

An additional 3% will be added for credit card fees

- I understand that I will be notified by email with **confirmation within two weeks** of receipt of my deposit.
- I understand that I will be billed **30 days prior** to each session for the balance and that payment is due before the start of the summer session.
- I understand that my deposit is **non-refundable after May 15**.
- I understand there are **no credits** for Summer Session lessons unless previously arranged with the director or due to teachers' absence.
- **Call to schedule an interview evaluation (925) 944-5559**

\_\_\_\_\_  
Signature