

# 2018-2019 HIS CLASSES Student Registration Form

Rev 4-01-18A

1. To register for classes, use a separate form to enroll your children in each class. Mail your check for one month's tuition payment (made payable to the individual teacher) along with a completed form to the address on the course description. **Your tuition check will not be cashed before July 1. Contact your teacher for their refund policies.**
2. **\*Annual Insurance Fee\*** – Mail **\$40** insurance fee per family **along with a completed registration form** to HIS CLASSES, 9614 Dornoch Dr, Spring, TX 77379. This payment is required for every family and must be made before the beginning of classes and will be non-refundable after July 1<sup>st</sup>. This is payable once per school year by the first day of classes.
3. Questions about each class should be directed to the teacher of that class. **If you register for any class before October 31, 2018, you are required to pay July, August and September tuitions if it is after the first of those months unless the teacher authorizes another agreement with you.** Teachers will have to spend extra time and effort "catching up" your student to the rest of the class.

## Print Neatly

1. Parents' Names: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Student E-mail: \_\_\_\_\_ Parent E-mail: \_\_\_\_\_  
Hm Phone: \_\_\_\_\_ Cell: Mom: \_\_\_\_\_ Cell: Dad: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Please enter the Student(s) Name(s) & specific name of the Teacher's class that is listed on the schedule.

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Male/Female Birth Month/Year \_\_\_\_\_

Class: \_\_\_\_\_ Class Day/Time: \_\_\_\_\_ Monthly Tuition \$ \_\_\_\_\_

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Male/Female Birth Month/Year \_\_\_\_\_

Class: \_\_\_\_\_ Class Day/Time: \_\_\_\_\_ Monthly Tuition \$ \_\_\_\_\_

3. Church currently attending: \_\_\_\_\_ Total Monthly Tuition \$ \_\_\_\_\_

4. Number of Years Homeschooled to Date: \_\_\_\_\_ If your student is new to HIS Classes, please provide 3 references (name, phone number & email) including a pastor or youth minister. You may write them on the back of this form.

5. \_\_\_\_\_ I understand that the yearly tuition has been divided into 10 monthly payments (**July through April**). Therefore, the full monthly tuition is due regardless of how many classes are taught in that month. The first payment is due at the time of registration. The remaining payments are due on the first of each month, August through April. **Any payment received after the 10th day of each month is considered late, and I will include a \$10 late fee on my check.** My student may not be allowed to attend class if my tuition is not paid by the 20<sup>th</sup> of the month. I will contact the teacher if I need to make special payment arrangements for different payment dates.

6. \_\_\_\_\_ I understand that this is a full year commitment and have every intention of completing this class unless unforeseen complications arise such as illness, moving, job loss, etc. I also understand that I am required to contact the teacher immediately in the event I need to drop the class or have trouble making a payment. I am responsible to pay the March and April tuitions if I drop a class after February 28, 2019. **Teachers have the right to set their own drop fees. One month's tuition is normally required as a drop fee for all classes. Some teachers require the full remaining balance to be paid if their class is dropped at any time. Discuss this with your teachers.**

7. \_\_\_\_\_ I understand that HIS CLASSES has a dress code and a conduct code. I will make sure my children obey and respect the rules, the teachers and the monitors. I will review the HIS CLASSES "Parent/ Student Agreement" on the website at [www.hisclasses.org](http://www.hisclasses.org) for the dress code and the conduct code and **complete the online Parent Student Agreement** for my family prior to the first day of classes.

8. \_\_\_\_\_ My **\$40 insurance fee payable to HIS Classes** has been mailed **along with a completed registration form** to: 9614 Dornoch Dr, Spring 77379 Check# \_\_\_\_\_

**Study Hall and Parent Student Agreement:** Study Hall is intended to be a safe place for students to wait between classes and students should not be left there for extended periods of time before, between or after classes. Please pick your students up promptly after their classes end. To help us better organize Study Hall, parents must register their students for Study Hall. There are links on the HIS Classes website to an **online study hall registration form and the Parent Student Agreement that must be completed before classes start in August.**

Thank you for sharing your student(s) with us and giving us the opportunity to serve you and your family as we serve the Lord through meeting the needs the homeschooling community. May the Lord bless your upcoming school year!