

Dear Parents,

Thank you for choosing ATFS Accelerated Learning environment for your child's supplemental education needs. We hope that your child will get the most Math and Science out of this. Please fill out the intention forms for the 2009 – 2010 session and return by **to ATFS Learning Center 433 South Street, Shrewsbury, MA**. These details apply to a start date of no later than September 1st, 2009. **Deposits are due along with the intention forms.** * We will set up a time for you come in and complete the enrollment process. Enrollment forms and other mandatory will be need to be filled out as part of the enrollment process.

Name of the Child _____

Grade next year _____

_____ will be joining/returning to ATFS for Saturday Accelerated learning classes starting September 2009

Please check the one that applies below. The fee structure below applies to joining date no later than September 1st, 2009

Check Below	Program
<input type="checkbox"/>	<u>Elementary</u> Saturday Accelerated Learning classes September 2009 – May 2010 (\$100.00 per month) (Grades 2 – 4)
<input type="checkbox"/>	<u>Middle</u> Saturday Accelerated Learning classes September 2009 – May 2010 (\$125.00 per month) (Grades 5 – 7)
<input type="checkbox"/>	<u>Algebra 1</u> for grades 8 through 10 (\$150.00 per month)
<input type="checkbox"/>	<u>Geometry Course 1</u> for grade 8 – 10 (\$150.00 per month)

Parent Signature _____

Date _____

New Enrollments Please fill this out and submit to the center with a check of \$20.00 and \$100.00. The \$20.00 is application fee and \$100 will be used will be used towards the first month's fee.

Name of Parent: _____

Address: _____

Phone Number: _____

Email: _____

* *Deposits are non- refundable and non-transferable.*