

Summer 2019 Registration

Student Name: _____

Student Birthday: _____

School for 2018/19 School Year: _____

School for 2019/20 School Year: _____

Student Mailing Address: _____

Parent Name(s): _____

Home Phone: _____ Cell Phone: _____

Email: _____

Please check all that apply:

- I am interested in 45 minute private lessons. I am only interested in classes BEFORE 1:00pm
- I am interested in 45 minute group lessons. I am only interested in classes AFTER 1:00pm.
- Any time is fine.

I, _____ give Vero Reading Garden, LLC permission to test my child, _____ on early reading skills. I understand that if my child is tested, Vero Reading Garden, LLC will not share the results with a third party. This evaluation is for placement purposes only.

There are eight classes during the summer session (June 3 - 21 AND July 1 - August 2nd) All private and group sessions are held once a week. I understand that there is a one-time fee of \$200 for group sessions and \$400 for private sessions. I also understand that missed classes will not be substituted or refunded. Payment is due by June 1, 2019.

Sign: _____

Print: _____ Date: _____

Please return it to the black box, located in the First Baptist Preschool lobby or mail it to, Vero Reading Garden, LLC, PO Box 644336, VB 32964.



772-321-4470
veroreadinggarden.com