



Student Name: \_\_\_\_\_

Step Up ID Number (if applicable): \_\_\_\_\_

Student Birthday: \_\_\_\_\_

School for 2024/2025 School Year: \_\_\_\_\_

School for 2025/2026 School Year: \_\_\_\_\_

Teacher (s) for 2025/2026 School Year: \_\_\_\_\_

Student Mailing Address: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Days Available to Attend Classes: (circle all that apply):

Monday      Tuesday      Wednesday      Thursday      Friday

Check off the areas you are interested in:

\_\_\_\_\_ I am interested in private reading sessions (K-5) Cost is \$75 per class.

\_\_\_\_\_ I am interested in group reading sessions (K-5) Cost is \$40 per class.

\_\_\_\_\_ I am interested in private reading sessions (PRE-K) Cost is \$75 per class.

\_\_\_\_\_ I am interested in group reading sessions (PRE-K) Cost is \$60 per month.

\_\_\_\_\_ I am interested in group MATH sessions (PRE-K) Cost is \$60 per month

I, \_\_\_\_\_ give Vero Reading Garden, LLC permission to test my child, \_\_\_\_\_ on early reading and/or math 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.

All private and group sessions are held once a week. The group, preschool math/reading classes have four classes per month. Grades K-5 classes follow the public school calendar. Classes will not be held on days off of school. The monthly invoice will reflect that. I understand that there is a once-per-year \$30 registration/materials fee and that missed classes will not be substituted or refunded. Make all checks payable to VERO READING GARDEN. Payment is due by the 25th of each month for the upcoming month. I also give Vero Reading Garden permission to take photos of my child to be used for publications, including advertisements, social media posts, and/or printing publications.

Sign: \_\_\_\_\_

Print: \_\_\_\_\_ Date: \_\_\_\_\_



## Waiver Of Liability

I, \_\_\_\_\_

Of \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Being of lawful age, do now release, acquit, and forever discharge First Baptist Church of Vero Beach, 2206 16th Avenue, Vero Beach, Florida 32960, from all actions, claims, demands, or damages accruing to me or my family resulting from any known or unknown injury, loss, or damages, on the above-described premises.

Signature:

\_\_\_\_\_ Date \_\_\_\_\_

Acknowledgment:

\_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

First Baptist Church of Vero Beach