I. Center Information

Center Days & Hours: *Monday-Friday 6:30 PM – 7:30 PM*   .

Contact information: Umesh Mehta
                         Email: umesh@math-logy.com
                         Tel: 512.609-8844 (Cedar Park Branch)
                         Tel: 512-244-6558 (Austin Branch)

Center Attendance:

Students are encouraged to attend Mathology classes twice weekly (Mon-Wed or Tue-Thus or Wed-Fri) for about 30 minute sessions.

Students should arrive at the center at the assigned time slots. If the student arrives late for his/her scheduled session he/she will have to either pick up work for the day or wait for an opening at the next available time slot. Please be available to pick up your child when he/she finishes his/her class work.

II. Tuition Fee and Payment Plans

Tuition Fee can be paid via one of the options below. Please initial your name by your choice.

Payment Plan	Enrollment Fees ($25 registration + $25 material)	Monthly Payment	Deposit*	Due at enrollment
PLAN I _____ (monthly by check)	$50	$80	$80	**$210**
PLAN II _____ (monthly automatic withdrawal)	$50	$80	$80	**$210**
PLAN III _____ (6-month advanced payment)	$25 ($25 discount)	N/A	N/A	**$505**

PLAN IV _____ (12-month advanced payment)	$0 ($50 discount)	N/A	N/A	**$960**

All subsequent payments are made automatically through either credit card or bank account, or via prepayment at the annual or semiannual rates. Please fill out the forms to authorize these automatic payments.

*In order for the deposit tuition to be applied, two conditions must be satisfied: first, an advanced-written notice must be given of discontinuing the program by the 25th of the previous month, and second, the student must have remained enrolled for at least six months consecutively. There are no exceptions.

III.   Center Policies

_____ I understand that parent home grading is required. All Answer Books must be returned. A $5.00 fee will be charged for each lost Answer Book.

_____ I understand that a late fee of $10 per subject will be applied for payments received after the third (3rd) day of the month.

_____ I understand that the Cedar Park Mathology Center reserves the right to withhold worksheets and prevent the students from attending Mathology Center Sessions if the monthly payment is not received by the 10th of the month.

_____ I understand that if my child does not take any Mathology material in a given calendar month, but plans to resume Mathology Study within 60 calendar days of absence, then he is considered 'absent' and I do not have to pay tuition for those days. When my child resumes Mathology study, the registration fee is not required. However, the current monthly tuition will be applied at the resumed time.

_____ I understand that if after 60 calendar days of absence, my child is considered a 'discontinued' student. If a 'discontinued' student resumes Mathology study, the registration fee and the current monthly tuition will be applied.

_____ I understand that paid tuition is not refundable or transferable. I understand that in order for the deposit tuition to be applied, two conditions must be satisfied: first, an advanced-written notice must be given of discontinuing the program by the 25th of the previous month, and second, my child must have remained enrolled for at least six months consecutively.

_____ I grant Mathology permission to use my child's name or image in the Center materials or promotions.

_____ I agree to notify the center immediately of any changes to your billing information. The Cedar park Mathology Center reserves the right to refer the matter to a collection agency.

IV.   Enrollment Information

According to your choices above, the total amount due at the enrollment is _____.
Your deposit will be applied for the month of _____. My next payment will be _____ and is due on _____.

By signing here, I agree that I am enrolling my child in Mathology and acknowledge that I have read, understand, and agree to all of the terms and conditions in this Agreement. I also agree that I have received a copy of this agreement. Finally, I hereby certify that I am an authorized representative of the above child.

_____

Student Name

_____   _____
Parent Name (print)   Parent Email Address

_____   _____ / _____ / 20_____
Signature of Authorized Parent   Date