

Guilford Day School Community Programs Registration Form

Important Registration Information

- * Please carefully read and complete **all** sections (both sides) of this registration form.
- * Submit separate registration form for each child.
- * You may register in person, by fax, or by mail. Registration is not taken by phone. Please send the completed form to:

Guilford Day School
Attn: Community Programs
3310 Horse Pen Creek Road
Greensboro, NC 27410
Phone: (336) 282-7044 Fax: (336) 282-2048

* **Please enclose a non-refundable first-time registration fee:**

Tutoring/Academic Coaching - \$75.00

The Knight Club - \$25.00

(Fee waived for previously registered students or current Guilford Day students.)

- * Payment for tutoring/academic coaching or participation in our after-school program, The Knight Club, is billed monthly. Rates are listed on the reverse side. Students with overdue accounts are subject to dismissal from the program.

Checks should be made payable to: Guilford Day School

- * If you need to cancel an individual session for Academic Coaching or Multi-Sensory Structured Reading, you must give a 24 hour notice or you will be charged for the session. A message must be left with the instructor. The session may be rescheduled based on the availability of the instructor.

General Information

Name of Student _____ Sex _____ Birthdate _____ Age _____

Name of mother/guardian _____ Name of father/guardian _____

Billing address _____ City _____ State _____ Zip _____

Mother's phone _____ work _____ cell phone _____ email _____

Father's phone _____ work _____ cell phone _____ email _____

Current School _____ Current Grade _____

Current School Address _____

Current School Contact _____ Current School Contact Phone _____

Has your child attended Guilford Day School Programs before _____ If yes, when _____

How did you hear about Guilford Day School? Please check all that apply.

Brochure Website Friend/relative Newspaper Other _____

Emergency Information

Persons to call in case of emergency, when parents cannot be reached:

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

In case of a medical emergency, I/we understand every effort will be made to contact parents or guardians. In the event that I/we cannot be reached, I/we understand that my/our child will be transported to the nearest medical facility, unless otherwise specified.

Parent Signature _____ Date _____

Medical Information

Please indicate any medical conditions that we should be aware of (allergies, medications, etc.)

Family Doctor _____ Phone _____

Academic Information

Diagnosis (please check all that apply): LD ADHD Other _____

Reading level (if known) _____

Please describe areas in which your child is having difficulties. Please be as specific as possible, as this will help in the placement of your child. Providing any relevant school information such as an IEP or Diagnostic/Assessment Report is also very helpful.

Knight Club Registration

Registration: \$25.00 (First-time registration only)

**Fees are waived for returning students or Guilford Day students. You will be billed monthly for the days you sign up for regardless of any absences.*

Daily Rate: \$18.00 per day

Please circle choices: Monday Tuesday Wednesday Thursday Friday

Days per week X \$18.00 = \$ _____ X 4 = \$ _____ (month)

MSSR Tutoring/Academic Coaching Registration

Registration: \$75.00 (First-time registration only)

**Fees are waived for returning students or Guilford Day students.*

(√)		Preferred Days	Preferred Times	Cost
	MSSR Tutoring (Multi-Sensory Structured Reading)			\$440 – 8 sessions
	Academic Coaching			\$360 – 8 sessions
Subtotal				
Registration Fee				\$75.00
Total				

****Registration forms will be reviewed immediately upon being received. You will be contacted within two weeks to establish a schedule of services and verify a start date. Thank you for your continued support and participation.**