



Mentor Club

Mathematics and Physics Tutoring
Elementary thru College Level
Cupertino and Surrounding Area
(408) 781-3925

2011 Summer Program Registration

Student Name: _____

School: _____ Grade: _____

Parent(s) Name(s): _____

Address: _____

Home (Work) Phone: _____ Cell Phone: _____

Parent Email: _____

Emergency Contact Name: _____

Emergency Phone: _____ Relationship: _____

Please select the course(s) you wish to take. Return this form with a check to our office at "21861 San Fernando, Cupertino, CA 95014" in person or by mail. Please make checks payable to our instructor **Jay Huang**.

<u>Class</u>	<u>Dates</u>	<u>Days</u>	<u>Time</u>	<u>Cost</u>
_____ Math Olympiad/ AMC 8	6/20-7/29 (6 weeks)	T, Th	10:00-12:00pm	_____
_____ Algebra I	6/20-7/29 (6 weeks)	T, Th	3:30-5:30pm	_____
_____ Algebra II	6/20-7/29 (6 weeks)	T, Th	7:00-9:00pm	_____
_____ Geometry	6/20-7/29 (6 weeks)	M, W	3:30-5:30pm	_____
_____ Pre-Calculus	6/20-7/29 (6 weeks)	M, W	7:00-9:00pm	_____
_____ Calculus	6/20-7/29 (6 weeks)	M, W	7:00-9:00pm	_____
_____ Trigonometry	6/25-7/16 (4 weeks)	Sat	1:00-3:00pm	_____
_____ SAT Math I	6/20-7/29 (6 weeks)	M, W	3:30-5:30pm	_____
_____ One on One Tutoring	_____	_____	_____	_____

Tuition: _____ Adjustment: _____ Subtotal: _____ Check#: _____

Notes: The tuition is due at the time of registration. No refunds will be granted once a class has started. No refunds or credits will be given for missed classes. To qualify a makeup class, you need to email or call 24 hours in advance. Makeup classes will be given only based on the available schedules. We reserved the right to change/cancel a class. If a class has less than two students registered, the class may be cancelled. There are no classes on July 4th and the makeup classes will be on July 8th, Friday.

I give permission for my child to participate in the program. I will not hold Mentor Club liable in case of accidents or injuries. In case of emergency, I authorize for my child to receive medical treatment at nearby medical facility at my own expense.

Parent Signature _____ Date _____