

ClassPass Student Enrollment Form

Course Name	_____	Start Date	_____	Fee	_____
Course Name	_____	Start Date	_____	Fee	_____
Course Name	_____	Start Date	_____	Fee	_____
Course Name	_____	Start Date	_____	Fee	_____
Course Name	_____	Start Date	_____	Fee	_____

Student Information

Student Name: _____
Daytime Phone: _____
Mobile Phone: _____
Student Email: _____

- Please complete this form to its entirety.

- Providing a mobile number is best practice as it allows us to reach the student promptly in the event of an unexpected cancellation (we never share your information).

ClassPass Coordinator Information

Contact Name: _____
Daytime Phone: _____
Mobile Phone: _____
Contact Email: _____

Billing Contact Information (for any class material purchases)

Contact Name: _____
Daytime Phone: _____
Contact Email: _____
Address: _____
City/State: _____
Billing Zip Code: _____

ClassPass Number

Computer Tutors USA, Inc. Policies & Procedures:

Registration & Payment: Please email all registration forms to Enroll@computertutorsusa.com. Registrations are processed within 24/48 business hours and seats are first come, first serve. Enrollment Confirmations will be emailed once processed and the student will receive a Reminder the Wednesday before the class start date. Payment for book fees is due no later than the Monday of the class start date. Each student may only register for up to 5 classes at a time.

Rescheduling/Cancellation by Student: Please email all cancellations of classes as soon as possible to Enroll@computertutorsusa.com. Cancellations for MOC classes must be made by the Monday before the class start date, or the full book fee will be charged to the responsible party.

Schedule Changes: Although we shall make every effort to hold all classes as scheduled, Computer Tutors USA, Inc. reserves the right to cancel or reschedule classes as necessary. In the event that a class is cancelled or rescheduled, all registered students will be notified as soon as possible.

I have read and agree to all terms of this contract:

Digital Signature _____ Print Name _____ Date _____