

Registration Form

Please print out this form and mail it to the address below, along with your course tuition.

Student Name: _____

School: _____ Counselor: _____ Grade: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Parents Work #: _____

Parents Email : _____

• **First Choice Location:** _____ **Date** _____

• **Second Choice Location:** _____ **Date** _____

• **Math Only Class Location:** _____ **Date** _____

Make your check payable to: Hunt Programs

Mail this form and your tuition check to:

Hunt Programs
P.O. Box 1113
Springfield, VA 22151

Tuition **(choose one)**

Tuition includes text and handout materials

☐ **Digital SAT Quick Review (1 three-hour class) • \$150**

☐ **MATH ONLY (2 three-hour classes) • \$300**

☐ **Digital SAT Review Total Course (3 three-hour classes) • \$450**

Total Amount Enclosed: \$ _____

Please Note!

Check all class dates and times carefully to avoid conflicts before registering. All registrations are accepted on a space available basis. Hunt Programs reserves the right to cancel classes that do not meet minimum requirements

Receipt of registration will be confirmed by telephone.

THERE ARE NO TUITION REFUNDS FOR MISSED CLASSES.

I Heard About The Hunt Course From: (Please Circle One):

Friend

Mailing

Internet

School Counselor

Newspaper Ad