



MathEdgeCore

6/25/2007

Achieve Success in School & Standardized Tests Guaranteed (K-8, Year Round)

Want to ace in school and the standardized test(s)? Achieve lifelong success in solving problems day to day? That's what this **guidance** program is all about! This program is tailored to meet each individual's learning needs / abilities / skill sets structured in small group sizes. Each student can pace herself / himself under expert guidance. Techniques learnt at **MathEdge** guarantee a measurable difference not just in your student's academic progress but also improve confidence, motivation and concentration levels that will help build a solid foundation for lifelong learning.

Materials: In-class exercises plus optional homework

Who: Grades K-6

Group size: 4-8

How Long: Each session is an hour from time slots: **Tue 4-7pm / Wed 4-7pm**

How often: Choose once or twice a week program.

Schedule: from www.mathedge.org

07-08 **MathEdgeCore** Program Registration for Cupertino Location

Please complete, mail form and check to **MathEdge** at "7246 Sharon Drive, Suite P, San Jose, CA 95129".

Student name: _____ **School:** _____ **Grade:** _____

Mother's name: _____ **Work phone:** _____ **Cell:** _____

Father's name: _____ **Work phone:** _____ **Cell:** _____

Email Contact(s): _____ (must provide at least one)

Address: _____ **Home Phone:** _____

How often (pls check): Once a week (\$120/mo with min 3 mos) Twice a week (\$180/mo with min 3 mos)

Choose an hour from time slots (Tue 4-7pm / Wed 4-7pm): _____

Registration and Assessment Fee: _____ \$60

Once a wk, pay: quarterly (\$360 x 4), or semi-annually (*\$690 x 2), or annually(*\$1320)

Twice a wk, pay: quarterly (\$540 x 4), or semi-annually (*\$1035 x 2), or annually(*\$1980)

**Fee reflects one month free if paid annually or 1/2 month free if paid semi-annually.*

Total Amount: \$ _____ **Check #** _____ Payable to **MathEdge**.

Note: No refunds will be granted but amount can be credited towards future **MathEdge** classes. We reserve the right to change/cancel a class.

I give my permission for my child to participate in the **MathEdge** program. I will not hold **MathEdge** liable of any accidents, physical or other injury from any and all claims, demands, costs, expenses, and compensation. By signing this form, I agree to these terms freely and voluntarily without inducement for myself and on behalf of my child.

Parent or Guardian Signature _____ **Date:** _____



Creating Sharp Minds For Sharp Solutions

www.mathedge.org

Cupertino Location:

7246 Sharon Drive, Suite P, San Jose, CA. 95129

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Fremont (Mission) Location:

39812 Mission Blvd, Suite 208, Fremont CA 94539

Ph: (510) 818-0546, **Email:** mathedge.fremont@gmail.com