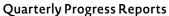
HOMESCHOOL PLUS ENROLLMENT/RENEWAL FORM March 2025- June 2025



Account Code (if known)		Date			Please check one:			
					 ENROLLMENT This is my first time enrolling 			
Father's Name	Mother's Name	Last Na	Last Name			in Homeschool Plus.		
Mailing Address	(City State Zi	State Zip Country				NEWAL	
					I have p in Hom		sly been enrolled of Plus.	
Phone	Fax	E-mail						
Enrollment Ir	nformation							
U.S. & CANADA	A Enrollment/Renewal					\$240		
INTERNATION	AL Enrollment/Renewa	Enrollment includes Teacher Training Materials for on			e parent.	\$260		
Deduct Longevi	ity Credit* (ifrenewing)					-		
Training Materi	als for second parent or to	ıtor (only available at this pr	ice when enroll	ing)		\$50		
Learning to Rea	d Training (only available at no cha	ge when enrolling)			No charge (check to order)	
Student Service	fees	Number of studer			nts	_×\$35		
*Longovity Cros	J:±				S	ubtotal		
*Longevity Credit To encourage continuity in your educational		Renewing for the 2 nd throu		\$30	Canad	ian GST		
program and to show our appreciation for the privilege of serving you, we offer longevity credits			Renewing for the 5th through 9th year \$45		TOTAL (USD)			
based on your consecutive years of enrollment.		Renewing for the 10 th through 14 th year \$60 Renewing for the 15 th through 19 th year \$75			, ,	vailable on training		
This credit is nonrefundable and may be deducted above after verifying the amount with us.					Only a partial refund may be available on training materials and services after 30 days from the invoice date. No refund will be available after 90 days.			
above arter verifying t	ille alliourit with us.	,			uate. N	io retuna wiii be ava	nable after 90 days.	
Beginning and endi	ng dates of your school yea	nr: Begins /	/	Eı	nds	/	/	
	s or months:							
Payment Me	thod VISA DISCOVER	MasterCard	Visa	Discover	Ameri	ican Express	Cash/Check	
	 Charge Card Number	Expi	Expiration Date			Signature		
Student Info	rmation (List only those en	rolling in the program or renewi	ng services.)			Grade for	Graduating in	
Last Name	First Name	Middle Name	Birth	Birth Date		2024-2025 School Year	2024-2025 School Year*	
			/	_/	M/F			
			,	,				
			/	— <i>/</i> ——				





I plan to send Quarterly Progress Reports by email. I plan to send Quarterly Progress Reports by mail.

