

# Canon Education

## After School Program Enrollment Form – 2023-2024



### Tuition & Fees (please circle the options):

- For early enrollment, the due date is **03/31/2023**, to credit back Registration Fee in the first tuition payment
- To enroll in the 2023-2024 school year after school program, please complete and return this form along with the payment: Current Students \$100 (Material Fee+Registration fee). New Students:\$450 (Deposit+Material fee+Registration fee). Registration fee can be credited if registered before 3/31/23)

Registration Fee (New Student)	\$100	Material Fee (All Students)	\$50/Semester
Registration Fee (Current Student)	\$50	Enrollment Deposit (New Student only)	\$300

- We provide different program to fulfill your situation

Program (Days/week)	4/5 days for every 4 weeks		3 or less days for every 4 weeks	
	New Student	Current Student	New Student	Current Student
2:50pm-6:30pm Basic Program	\$610	\$565	\$510	\$465
<b>Enrichment Classes (per class)</b>				
Drawing: \$25	Science: \$25	Music Lessons: Please ask front desk for detail		

<input type="checkbox"/> New Student	<input type="checkbox"/> Current Student	Tuition pay in-full (5% discount): <input type="checkbox"/> Yes <input type="checkbox"/> No
--------------------------------------	--	---

Child's Name \_\_\_\_\_ Birthday \_\_\_/\_\_\_/\_\_\_ Age \_\_\_ Sex: F M  
(Print Please) Last, First Middle (Circle one)

School (coming School Year): \_\_\_\_\_ Grade \_\_\_ Room \_\_\_

Transportation no \_\_\_ need \_\_\_ pickup time (approximate): \_\_\_\_\_

Home Address \_\_\_\_\_

Siblings at Canon Afterschool (5% tuition discount if applicable): \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Cell # ( ) \_\_\_\_\_

Address \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Employer & Address \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Cell # ( ) \_\_\_\_\_

Address \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Employer & Address \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Emergency Contact (other than Parent) \_\_\_\_\_ Tel: ( ) \_\_\_\_\_

Physician \_\_\_\_\_ Tel: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Dentist (Name & Address) \_\_\_\_\_

Allergies (if any) \_\_\_\_\_

All enrollment applications are subject to approval. Registration is not complete until a non-refundable registration fee has been paid and the Enrollment Form has been signed.

- I/We, the parent(s) or legal guardian(s) of the child named above am/are hereby making an application for this child to participate in the programs of Canon Education.
- I/We have read, understand and agree to abide by the tuition and the enrollment agreement (Our enrollment policy requires that in the case of joint physical custody situation, all enrollment forms and contracts must be signed by both parents to be accepted as complete.)
- I/We understand that Canon Music may use my or my child's photograph publicly to promote Canon Education.

Signature of Parent/Guardian \_\_\_\_\_

Print Name: \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Print Name: \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

(Note: The material fee and enrollment deposit are refundable ONLY if Canon is notified in writing of your intent to withdraw by 06/16/2023), after that only 50% of the enrollment deposit will be refunded)

Address: 10885 S. Blaney Ave., Cupertino, CA 95014; Email: [Infocanoneducation@gmail.com](mailto:Infocanoneducation@gmail.com); Tel: 408-996-8033