



# Registration Form 2011-2012

Serving the Chattanooga Homeschool Community for 13 years with Excellent Curriculum, Biblical Focus, Healthy Accountability and Social Interaction  
Email: [hhlearning@comcast.net](mailto:hhlearning@comcast.net) • Phone 706.956.8344  
[www.hhlearning.com](http://www.hhlearning.com)

## General Information \*\* please complete one for each child\*\*

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Student's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_  
(This address will be used for billing purposes)

Cell Phone: (\_\_\_\_) \_\_\_\_\_

Grade level of your child (in the Fall) \_\_\_\_\_ Age \_\_\_\_\_ Umbrella School \_\_\_\_\_

Father's occupation \_\_\_\_\_ Mother's occupation (if applicable) \_\_\_\_\_

\_\_\_\_\_ Please check here **if you would like to receive your bill thru the postal service.** We will be using your email address for billing purposes each month, unless you otherwise specify here.

How would you like to be billed? \_\_\_\_\_ monthly \_\_\_\_\_ semester (5 months) \_\_\_\_\_ year (10 months)

## Special Information

Does your child have any learning deficiencies? \_\_\_\_\_ If so, please explain on the back of this page.

\*\* This information will be kept **strictly confidential**...our knowledge of any area in which your child struggles will simply help us serve him/her better in the classroom.

## Scholarship Opportunities and Financial Aid

Hilger Higher Learning seeks to provide quality education to students from families with varying financial means. In order to provide this service, we need families who are willing to sponsor some of our low income families. Hilger Higher Learning matches your gift 2 to 1! Would you like to provide scholarship money for a family and partner with HHL in this great endeavor, please initial below:

\_\_\_\_\_ Yes, I would like for you to add \$5 to my monthly bill to help a needy family.

\_\_\_\_\_ Yes, I would like to help a needy family in the specific amount of \$\_\_\_\_\_ per month.

\_\_\_\_\_ \*\*\*If you are a family that has a specific financial need in order to participate in our courses, please initial here. You will need to print off, fill out, and send in our **Financial Aid Form** to qualify. Please go to our registration – calendar page to print off the application. We will not consider you until all of this is complete and in our office. Someone will contact you concerning your need.

**Payment Guidelines:** Please initial each of the following:

\_\_\_\_\_ I agree to pay 10 monthly payments **beginning in August and ending in May**, or 2 semester payments (5 months at a time) or 1 yearly (10 month) payment, depending on the box I checked above. Invoices are sent out **via email unless you checked the box to receive your bill in the mail** around the 5<sup>th</sup> of each month and are due upon receipt.

\_\_\_\_\_ I understand that my invoice is **DUE UPON RECEIPT** and is considered **LATE** if Hilger Higher Learning does not receive my monthly payment by **the last day of the month**. I realize I will be charged a **\$10 late fee** if my check is not received by the end of the month, or if I have not contacted HHL to make other arrangements.

\_\_\_\_\_ I understand that all checks must be sent to Hilger Higher Learning or dropped in the secure "lock-box", located in the teacher's office of the church.

\_\_\_\_\_ I understand that payment is required for each class, even if my child is absent.

\_\_\_\_\_ I agree to pay a **\$20 charge** on any returned check.

\_\_\_\_\_ I agree to pay a **\$75 charge per class** if I withdraw after the second week of class. **This INCLUDES dropping at the end of the semester**; unless the class is only one semester.

\_\_\_\_\_ I understand that all registration fees and payments are non-refundable (with the exception of a class not forming or a class time changing).

\_\_\_\_\_ I understand that if my account becomes overdue by 2 months or more, I will be responsible for all reasonable interest and collections fees if I'm delinquent in paying. I further understand all registration fees and tuition payments will be forfeited if my child is dismissed at any time during the year.

**Course Information:** [Visit our website at www.hhlearning.com](http://www.hhlearning.com)

Please fill out the following information for the courses you have chosen for your child. Course schedules and registration fees can be found on our website ([www.hhlearning.com](http://www.hhlearning.com)). Registration fees for each class **MUST** be sent in along with this form.

<u>Course Chosen</u>	<u>Day and Time</u>	<u>Registration Fees</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total registration fees to be sent in with registration form:** \_\_\_\_\_

**All parents and students are required to meet the following terms and conditions:**

1. The student must conduct himself/herself in a manner worthy of the gospel of Christ, as solely determined by Hilger Higher Learning.
2. The parent must be actively involved in every subject the student takes from Hilger Higher Learning.
3. The student must complete all homework on a consistent basis.
4. The student must not have excessive absences. Our teachers will let you know if this becomes a problem.
5. The student's grades must reflect his/her ability.
6. The student must leave the church premise (parking lot included) after class, unless otherwise stated, supervised by an adult or if they have another class within the allowed 10-15 minute window.

**\*\*\* If the above standards are not met and/or if biblical behavior is not kept throughout the year and/or over the summer, we reserve the right to ask the student to discontinue classes at Hilger Higher Learning. We have a zero tolerance policy if items, which include but are not necessarily limited to, alcohol, drug or tobacco, are possessed, consumed or even joked about by a student. Also, if a student is caught cheating on a test or quiz, he/she will be subject to dismissal from, and at the sole discretion of, Hilger Higher Learning.\*\*\***

## Agreement Information

We, the parents/guardians of \_\_\_\_\_ (student's name) have read and understand the standards, payment guidelines, criteria, terms and conditions stated in this form. We/I further understand that failure of the student and/or parent/guardian to comply with these standards, payment guidelines, criteria, terms and conditions may result in the student being dismissed from his/her enrollment at Hilger. Thus, we are committed to the guidelines stated in this form. We understand that our child is attending classes at First Alliance Church at their own risk. We will not hold Hilger Higher Learning, First Alliance Church, any teacher or employee affiliated with Hilger Higher Learning liable in any way.

Signed by parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

Signed by student \_\_\_\_\_ Date \_\_\_\_\_

You will be sent an acceptance letter (containing rules, regulations, textbook information, and a calendar of events) once your registration form has been processed and accepted. You will also receive an HHL handbook/directory at our parent meeting or during the first week of school if you can't make it to the parent meeting. Please allow 2-3 weeks for your registration to be processed. Also, please do not purchase books until you have received an acceptance letter.

Hilger Higher Learning reserves the right to refuse any student for acceptance into our program, at Hilger Higher Learning's sole discretion. We strive to keep high standards for our students, and we want the environment of our program to remain positive and encouraging for all of the students enrolled. In order to do that, we would like for you to fill out this questionnaire which will provide us with some important information about your family. Before doing so, if you haven't already, please read over our philosophy, partnership (both are on the front page of our website), and the information on our parent page to make sure they are in line with what you are seeking to do in the home.

**Please fill out ONE per family. However, if you are a returning family you can skip this part and move on to the Health and Emergency information on the last page.**

### Questionnaire

1. How many years have you been involved in homeschooling?
2. What are the reasons you have chosen to homeschool your child (children)?
3. Who is the primary teacher in your child's academic day?
4. What days and how many hours will they be taught by the primary teacher?

5. Does the primary teacher work? If so, is it part-time or full-time? Please specify how many hours per week.

6. Has your child ever been involved in smoking, drinking, or drugs? If yes, please explain.

7. Has your child ever been suspended, expelled, or asked to withdraw from a public or private school? \_\_\_\_\_

If yes, please give the reason (if more room is needed, please use the back of this or another piece of paper), how long ago, and how you and your spouse dealt with your child during this situation.

### **Health and Emergency Information**

Drug and other allergies: \_\_\_\_\_ YES (list below) \_\_\_\_\_ NO

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Taking Medications: \_\_\_\_\_ YES (list below) \_\_\_\_\_ NO

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Past Medical History and/or other pertinent Information you think HHL ought to know about:

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