



**Registration Form for Ottimmo Math: (All checks payable to Ottimmo LLC)**

Student Name: \_\_\_\_\_

Student Current Grade: \_\_\_\_\_ School: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Parent Cell: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Parent Cell: \_\_\_\_\_ Parent Email: \_\_\_\_\_

**Fees:**

\_\_ 1<sup>st</sup> - 5<sup>th</sup> Grade: Spring Semester \$ 250.00

\_\_ 6<sup>th</sup> Grade: Spring Semester \$ 325.00

Amount Paid: \_\_\_\_\_

Emergency Contact (other than parent): \_\_\_\_\_

Referred By: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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For Internal Office Use:

Check # \_\_\_\_\_ Date: \_\_\_\_\_ Amount Received: \_\_\_\_\_

**Student enrolled in Level: 1 2 3 4 5 6**