UPPER LEVEL SCHEDULE
ENROLLMENT / TUITION CONTRACT ADDENDUM

Please complete one form per student.

Student Name: _____

Monday/Wednesday TIME	CLASS	BOOK COSTS	FEES	Yr. Tuition $450/unit hr
	TOTAL			

Parent/Guardian Signature: _____ Date:_____

Parent/Guardian Signature: _____ Date:_____

Administrator or Other School Official: _____ Date: _____