



Quick Stars

TUTORING

Student's name: _____

Date of birth: _____

School/grade: _____

Parent/guardian: _____

Phone numbers: _____

Emergency contact: _____

Email address: _____

Address: _____

How you heard about us: Yelp ___ Web search ___ Referral (name) _____ Other _____

Please describe your student's strengths:

Please describe your reason for enrolling and your goals for your student:

Please list special concerns (if any):

Preferred time slots: 1st choice: _____ 2nd choice: _____ 3rd choice: _____

I have read Quick Stars Policies and agree to abide by the rules. As the parent/legal guardian of _____, my spouse and I waive the right to sue and release Quick Stars Tutoring LLC and Tracy Lee from liability for any unforeseen accident or injury that may occur before, during or after a tutoring session. Signature: _____ Date: _____