



LESSON CONTRACT

Subject(s): _____

Student: _____ **School:** _____ **Grade:** _____

Parent or Legal Guardian:

Address:

City: _____ **State:** _____ **Zip Code:** _____

Phone Numbers: Student: _____ **Parent:** _____

Email Addresses:
Student: _____ **Parent:** _____

Fee Agreement:

The hourly rate for tutoring services is \$75.00. The parent with the student hereby agrees to pay my lesson fees in advance. Number of lessons: _____ @ \$75.00 = _____

Materials Fee: \$35.00 to be paid once per testing cycle: Feb., April, June, Sept., Oct., Dec.

If you need to cancel your tutoring session you may cancel up to 24 hours without any penalty. However, if you cancel within 24 hours of the session the payment is due in full.

Student's Signature: _____ Date: _____

Parent or Guardian's Signature: _____ Date: _____

Teacher's Signature: _____ Date: _____