

HEP TX Registration Form 2025-2026

Name: First	Middle	Last	
(Male or Female) Age	Grade		
Address	City	Zip	
Parent(s) Names			
	Cell/Home		
Parent #2 email	Cell/Home		
Student email	Student Phone:		
(Please note that we MUST ha	ave a contact that can be	reached during school hours.)	
Other Emergency contact name	e/phone:		
Does your student have any me	edical issues or learning dif	fferences? Yes or No If so, pleas	
list:			

TEACHEREASE: IT IS IMPERATIVE THAT PARENTS OF NEW STUDENTS SET UP THEIR ACCOUNT WITH TEACHEREASE AND CHECK IT DAILY. IT IS THE COMMUNICATION PORTAL BETWEEN PARENTS AND FACULTY.

Registration Information

Course Name (list each class you are purchasing)	Recommendation Attached or Seen (Honors classes)	Cost
SUBTOTAL		\$

Continued	
Class Sub-Total (from previous page)	\$
Non-refundable deposit for each class - \$150 per class	\$
New Student Application Fee (\$35.00), if applicable.	\$
Registration Fee (\$125.00/yr.)	\$
Art Class Fee (\$70.00 per class; Classical School \$35.00), if applicable.	\$
SUBTOTAL	\$
Deposit Due Upon Registration: (Tuition Deposit + New Student + Registration + Art Fees)	\$
June 1 st – Tuition in full or ½ Down Payment + Finance Charges (unless using a customized plan)	\$
Finance Fee(s) @\$15/class (non-refundable)	\$
Remaining Balance (Payments due October 6 and November 3)	\$
In two equal payments of	\$
Please note that late payments will result in a 15% charge outstanding amounts.	per month on
Forms Received: Waiver, Ins. Card, Medical:	, Teacherease (explained):
, Teacherease Added: Contract Signed:	
PAYMENT INFORMATION: Cash / Check / Credit Card (Visa / For credit card payments please complete the following: (A 3% processing fee will be charged when paying with credit cards. The and check transactions.) Card# Expiration:(mm)	ere is no additional fee for cash
Credit Card Zip:CVV:	
PAYMENT AGREEMENT: (Please read carefully as this	s is a <u>legal contract</u> .)
I understand and agree that my signature on this registration form constitutes a coof Texas and myself. I understand and agree to pay in full for any and all enrolled in even if my child withdraws from the class during the semestright to pursue the collection of any outstanding fees due and that if a legal judgm be responsible for all court costs, attorney fees, and course fees. I also understand at an HEP TX, Inc. function, HEP TX will not be held liable, nor will its employees THIS CONTRACT AND UNDERSTOOD ITS CONTENTS, AND I VOLUNTARILY FREE ACT. MY SIGNATURE BELOW ALSO CONFIRMS THAT I HAVE READ A STATEMENT OF FAITH AND AGREE TO ABIDE BY IT (posted on the HEPTX.co	contractual agreement between HEP classes that my child is ster. HEP of Texas reserves the ent is sought, the undersigned will that if my child contracts Covid-19 s. I HAVE CAREFULLY READ SIGN THE SAME AS MY OWN ND UNDERSTAND HEP TX'S
Signature Relationship (Parent/Guardian)	Date
(i arcing Guardian)	