



# IOWA Test Registration Form 2026

## Home Education Partnership of Texas, Inc.

208 E. Edgewood, Friendswood, TX 77546 281-922-0472

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

**TEST ORDERED FROM BJU    Yes            No            Order by 4/1/26**

<b>IOWA Test</b>	<b>Session</b>	<b>Cost</b>	<b>Paid</b>
Grade at the end of spring 2026	May 12 & 13, 2026 9:30-12:45 approx. times	\$48.71	

### Method of Payment:

Cash \_\_\_\_\_ Check # \_\_\_\_\_ Driver's License # \_\_\_\_\_

Please make checks to: HEP Bookstore.

Credit Card: MC/Visa/Discover/American Express (circle one)

Card # \_\_\_\_\_ Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### ***Payment Agreement – Read carefully as this is a legal contract:***

I understand and agree that my signature on this registration form constitutes a contractual agreement between HEP of Texas and myself. I understand and agree to pay in full for any testing and/or related fees. HEP of Texas reserves the right to pursue the collection of any outstanding fees due and that if a legal judgment is sought, the undersigned will be responsible for all court costs, attorney fees, and course fees.

I HAVE CAREFULLY READ THIS CONTRACT AND UNDERSTOOD ITS CONTENTS, AND I VOLUNTARILY SIGN THE SAME AS MY OWN FREE ACT. I ALSO AGREE TO ORDER THE TEST IN A TIMELY MANNER.

\_\_\_\_\_  
**Parent/Guardian**

\_\_\_\_\_  
**Relationship**

\_\_\_\_\_  
**Date**