



NURO **SCHOOL**

The Future belongs to us

APPLICATION FORM

Name and Surname of child: _____

Name of (current) School: _____

Grade: _____

Teacher (class teacher): _____

Teacher (subject teacher): _____

Subject to be tutored: _____

Name of Parent: _____

Contact details (Parent): Home: _____

Office: _____

I, _____ (Parents name and surname) commit to making payments for _____ (Name of child) who is in Grade _____ for the following subjects _____ .

These payments will be made prior to my child commencing classes at Nuro School. I agree to pay this amount from the time my child commences for the duration of classes until the end of November of that year. I agree that Nuro School will discontinue my childs classes if payments are not made on time i.e as agreed upon with Nuro School. I also permit Nuro School to take legal action if payments are not made as agreed upon.

Your participation is highly appreciated.

Regards

Nuro School Team