Enrollment Agreement and Credit Card Authorization

Group Tutoring

Physics 3 (Wilton SCI373)

I agree that the student below will attend all sessions at their designated times. I understand that I must give at least 72-business hours' notice (excludes weekends) in writing if the student below cannot attend a session, and that if I do not, I will still be responsible to pay for the session.

Parent's Name: _____   **Home Phone:** _____

Parent's Email: _____   **Cell Phone:** _____

Student's Name: _____   **Town/School/Year:** _____

Credit Card Type: _ON FILE_   **Credit Card Number:** _ON FILE_____

Expiration Date: _ON FILE_____   **Security Code:** _ON FILE_____

Name on Card: _ON FILE_____

Street Address: _____

Town: _____   **State:** _____   **Zip Code:** _____

Rates: 3 students or less: $75/hour/student | 4 or more students: $60/hour/student

AUTHORIZATION

I hereby authorize Bridgewater Prep LLC to charge my credit card for fees associated with services provided. I agree that periodic charges will be applied to my credit card according to the Bridgewater Prep account billing cycle, and in order to cancel the recurring billing process, I am required to contact Bridgewater Prep at least seventy-two (72) business hours (excludes weekends) in advance to either cancel the associated Bridgewater Prep account, or arrange for an alternative method of payment. I understand that Bridgewater Prep will not mail me any invoices or bills. I agree that if I have any problems or questions regarding my account or any services provided by Bridgewater Prep, I will contact Bridgewater Prep for assistance using the contact information on their website at bwprep.com. I also agree that I will not dispute any charges with my credit card company without first making a good faith effort to remedy the situation directly with Bridgewater Prep. I guarantee and warrant that I am the legal cardholder for this credit card and that I am legally authorized to enter into this recurring credit card billing agreement with Bridgewater Prep LLC.

_____   _____
Signature of cardholder   Date signed