



The Imagine House

3610 Blue Ridge Garland, Texas 75042

Office: (972) 272-6190 Fax: (214) 227-4474

Email: info@theimaginehouse.com
www.theimaginehouse.com

Class Registration

First Name	<input type="text"/>
Last Name	<input type="text"/>
School Attend	<input type="text"/>
Grade Level	<input type="text"/>
Street Address	<input type="text"/>
Address (cont.)	<input type="text"/>
City	<input type="text"/>
State/Province	<input type="text"/>
Zip/Postal Code	<input type="text"/>
Country	<input type="text"/>
Home Phone	<input type="text"/>
Work Phone	<input type="text"/>
Parents Name	<input type="text"/>
Emergency Phone	<input type="text"/>
Email	<input type="text"/>
Referred By	<input type="text"/>

1. Please list the class you would like to take.

Class Name	<input type="text"/>
Day	<input type="text"/>
Time	<input type="text"/>
Teacher	<input type="text"/>

2. Please list the class you would like to take.

Class Name	<input type="text"/>
Day	<input type="text"/>
Time	<input type="text"/>
Teacher	<input type="text"/>

3. Please list the class you would like to take.

Class Name	<input type="text"/>
Day	<input type="text"/>
Time	<input type="text"/>
Teacher	<input type="text"/>

4. Please list the class you would like to take.

Class Name	<input type="text"/>
Day	<input type="text"/>
Time	<input type="text"/>
Teacher	<input type="text"/>

5. Please list the class you would like to take.

Class Name	<input type="text"/>
Day	<input type="text"/>
Time	<input type="text"/>
Teacher	<input type="text"/>

If you are registering for individual tutoring services then under class name fill in individual services plus the subject you need help in.