**Student Name (Last, First)** Name

**Student DOB (D/M/Y)** DMY

**Grade (as of Sept 2021)** grade **Quills and Quotes Level** Class

**Address** address

**1) Parent/Guardian Name** parent name

**home phone** home phone **cell phone** cell phone **email** email

**2) Parent/Guardian Name (Last, First)** parent

**home phone** home phone **cell phone** cell phone **email** email

**Student’s G-mail address (\*must be a G-mail address):** student’s G-mail

initial I understand that a portion of the class may be recorded for students who miss the class. This recording would only be played for another Quills and Quotes student and will not be forwarded to any person outside of Quills and Quotes. Students will be notified when the class is recorded and have the option of turning off their video for that portion of the class.

**I have read, understood, and agreed to the Quills and Quotes policies attached to this form and found on the website:** **www.quillsandquotes.ca/policies**

I understand that there are some privacy risks with online video conferencing read full details under Policies).

I understand that my deposit is non-refundable, and each payment is non-refundable once the payment date is passed. I may withdraw my child (the Registrant) before the next payment date for a full refund of the upcoming payment. All withdrawals must be in writing to [admin@quillsandquotes.ca](mailto:admin@quillsandquotes.ca)

**After your child's assessment, please complete this form and attach 3 cheques payable to Quills and Quotes ($100 deposit, $900 on September 1st and $864.50 Jan 1st) and write your child's first and last name on each cheque and mail to: Quills and Quotes, 10 Rosewood Avenue, Mississauga, ON, L5G 3H9. Alternatively, you may send an e-transfer to** [**admin@quillsandquotes.ca**](mailto:admin@quillsandquotes.ca) **(appears as 2601798 Ontario Inc).**

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Print Name Signature Date

***You will receive an e-mail confirmation of your child's registration. Please contact the office if you do not receive this confirmation within 7 days.***

**What if I wish to withdraw from the program? Will I receive my money back, or a partial refund?**

Once a child is registered in the program, the deposit cannot be returned. However, any postdated cheque that is dated after the withdrawal date will be returned in full. Once the cheque date is passed, no refund can be given for that cheque. A written request to withdraw from the program must be sent to admin@quillsandquotes.ca.

**What if my child misses a class?**

There are no make-up classes at Quills and Quotes. However, all missed handouts will be provided, and teachers and administration staff can be contacted via e-mail or Google Classroom with any questions about the missed work. Teachers may also provide online office hours for questions.

**Is it possible for my child's class to be cancelled?**

Yes, if there is insufficient enrollment for a class, the class may be cancelled. A full refund of all cheques, including the deposit, will be returned.

**What if my child finds the class too easy or too difficult, can they be moved to another level?**

In general, the assessment considers all your child's strengths and needs, and placement is done accordingly. Also, each teacher can individualize the curriculum to ensure your child is challenged appropriately, but if needed, a child can be moved to another level.

**Technical difficulties and closures:**

Classes will be cancelled in the event of technical difficulties. Closure information will be posted on Google Classroom. The class will be made up.

**Privacy:**

Quills and Quotes is a corporation incorporated under the laws of Ontario, with its office located at 10 Rosewood Avenue, Mississauga, ON, L5G 3H9. The protection of your personal information is essential to Quills and Quotes. Quills and Quotes complies with the federal Personal Information Protection and Electronic Documents Act (PIPEDA), as well as with the applicable provincial privacy legislation.

Virtual School has some inherent privacy and security risks that information may be intercepted or unintentionally disclosed. We want to make sure you understand this before we proceed. To improve privacy, you should take steps to participate in this virtual encounter in a private setting. By signing this form, you consent to accept the privacy risks in online teleconferencing.

Name Date