

Tutoring Agreement

Personal Information

Name of Student: _____

Date of Birth: _____ Grade Level Sept. 2021 _____

School Attending: _____

Subject(s) to Tutor: _____

Reading Level (for English Tutoring): _____

Name of Parent/Guardian: _____

Address: _____

Home Phone: _____ Cell: _____

Email: _____

Do you accept text messages: (Circle) Yes or No

Concerns of Parent/Teacher: _____

Health Issues/Allergies: _____



Tutoring Agreement

Signature Page

Parent/Guardian

Parent/Guardian

Date

Tutor Tots

Tutor Tots

Date

By signing this Agreement, you agree to all the terms and conditions noted on www.tutortots.ca under "Policies" and the Virtual Online Tutoring Instructions/Policies found under "Online." You understand that your monthly payment is due on the 1st of every month. You understand that the tutor will wait in the classroom for 15 minutes and that if you do not show up for class, there will be no make up class granted. You acknowledge that failure to follow the above-noted policies may result in termination of tutoring services provided to your child (children) by Tutor Tots.



Tutor Tots