

ACT PREP ORDER FORM – SPRING 2018

PLEASE PRINT OR COMPLETE TWO COPIES OF THIS FORM: ONE FOR YOUR RECORDS AND ONE TO BRING TO THE SCHOOL WITH PAYMENT.

Student Name _____

Student Address _____

Phone Number _____ Email _____

| DATE | TEACHER | CLASS | (\$20 per class) |
|------|---------|-------|------------------|
|------|---------|-------|------------------|

(Please check the sessions which you desire your student to attend.)

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|--------------------|---------|---|--|
| _____ Tue., Jan 16 | Jehle | MATH: Skills and Strategies for Pre-Algebra | |
| _____ Tue., Jan 23 | Newkirk | SCIENCE: Part I | |
| _____ Tue., Jan 30 | Jehle | ENGLISH: Punctuation | |
| _____ Tue., Feb 6 | Jehle | READING: Part I | |
| _____ Tue., Feb 13 | Newkirk | SCIENCE: Part II | |
| _____ Tue., Feb 20 | Jehle | MATH: Skills and Strategies for Elementary Algebra | |
| _____ Tue., Feb 27 | Jehle | ENGLISH: Grammar | |
| _____ Tue., Mar 6 | Newkirk | SCIENCE: Part III | |
| _____ Tue., Mar 20 | Totoro | WRITING | |
| _____ Tue., Mar 27 | Jehle | MATH: Skills and Strategies for Coordinate Geometry | |
| _____ Tue., Apr 3 | Jehle | ENGLISH: Sentence Structure | |
| _____ Tue., Apr 10 | Jehle | READING: Part I | |
| _____ Tue., Apr 17 | Jehle | MATH: Skills and Strategies for Plane Geometry | |
| _____ Tue., Apr 24 | Jehle | ENGLISH: Rhetorical Skills | |
| _____ Tue., May 1 | Jehle | MATH: Skills and Strategies for Intermediate Algebra and Trigonometry | |

| DATE | TEACHER | PRACTICE TEST (\$15 per practice test) |
|------|---------|--|
|------|---------|--|

| | | |
|--------------------|-------|--|
| _____ Thur., Feb 1 | Jehle | Practice Test at Christ Prep. 1:00 - 4:30 PM |
| _____ Thur., Apr 5 | Jehle | Practice Test at Christ Prep. 1:00 - 4:30 PM |

***** ACT Test Test Dates: Saturday, February 10 (Register by January 5)

Saturday, April 14 (Register by March 9)

Saturday, June 9 (Register by May 4)

TOTAL DUE:

_____ seminars @ \$20 per session = \$ _____

_____ practice tests @ \$15 per session = \$ _____

TOTAL DUE = \$ _____

Office Use Only

PAID _____ DATE: _____ CHECK # _____

