

Full Partial

Sports Scholarship:



Magsaysay Village, La Paz, Iloilo City, Philippines 5000

(033)320-7442 (033)508-6891

OFFICIAL ENROLLMENT / REGISTRATION FORM

This form is FREE OF CHARGE and shall be available upon enrollment. This should be accomplished by the applicant or the designated guardian in lieu of the applicant. The accomplished form should be submitted to the Registrar's Office ONLY UPON FIRST PAYMENT OF ENROLLMENT. All information should be WRITTEN LEGIBLY IN PLAIN BLOCK LETTERS. It is understood that submitting this form means that you have read and agreed to the terms of enrollment which is stated at the back portion of this form. Non-compliance of any stated clause herewith shall deem this form invalid.

Inst	ructions for Filling Up			
1. Pay the prescribed enrollment fees 2. Write leg	ibly in plain block letters using dark ink 3. Submit before enrollment ends			
(Last Name)	Basic Information: PEDRO Coven Name) Date of Birth Month/ Day/ Year) Place			
STUDENT'S COPY (THIS SHALL SERVE AS THE OFFICIAL CERTIFICATE OF CONTRACT OF ENROLLMENT) Choose the Grade Level you are currently enrolling into by marking the corresponding box with an X: Primary: 1				
School Year: For Senior HS, choo	se a strand: STEM Science, Technology, Engineering & Mathematics ABM & Management			
	nrollee's Information:			
Name:	(MCLII- NI)			
(Last Name) (Given Name) Age: Date of Birth:	(Middle Name) Place of Birth:			
(Month/ Day/ Ye	ar)			
Permanent Address:				
	Mobile No(s).:			
Landline No(s).:	-03			
	on:Employer / Company:			
Mother's Name: Occupation	n: Employer / Company:			
Partial Payment:	Cheque, with amount, bank and cheque no. Cheque, with amount, bank and cheque no. Tangements, please specify:			
SCHOOL'S COPY (THIS SHALL BECOM	E THE OFFICIALLY BINDING CONTRACT OF ENROLLMENT)			
Choose the Grade Level you are currently enrolling into by marking the corresponding box with an X: Primary: I				
School Year: For Senior HS, choo	se a strand: STEM Science, Technology, Engineering & Mathematics ABM & Management			
Enrollee's Information:				
Name:				
(Last Name) (Given Name)	(Middle Name)			
Age: Date of Birth:(Month/ Day/ Ye	Place of Birth:			
Permanent Address:				
Email Address:	Mobile No(s).:			
Landline No(s).:	That and All all was a second and a second a			
Father's Name: Occupation	on:Employer / Company:			
Mother's Name: Occupation	n: Employer / Company:			
Information on Payment Method:				
Full Payment: Cash, with total amount of	Cheque, with amount, bank and cheque no			
Partial Payment: Cash, with total amount of	Cheque, with amount, bank and cheque no			
Academic Scholarship: Full Partial Other arrangements, please specify:				



Contract of Enrollment

In consideration of my / our son's enrollment at PAREF Westbridge School, Inc., I / we agree to abide by this contract and rules provided for in section 62 of the **Manual of Regualtions for Private Schools**, Eight Edition quoted hereunder, to wit:

When a student registers in a school, it is understood that he is enrolling for the entire school year for elementary and secondary courses. Section 66 of the same Manual states that a student who transfers or otherwise withdraws, in writing, within two weeks after beginning of classes, may be charged ten percent (10%) for the total amount due for the term within the first week of classes, regardless of whether or not he actually attended classes.

The student may be charged all the school fees in full if he withdraws anytime after the second week of classes. However, if the transfer or withdrawal is due to a justifiable reason, the student shall be charged the pertinent fees only up to and including the last month of attendance. Miscellaneous and other fees upon enrollment are not refundable.

In fairness to those who are paying punctually, total overdue accounts shall be charged one percent (1%) per month. An account is overdue if it remains unpaid after the last day of the quarter exams.

A student whose account are not paid may be allowed to take exams only if the parent / guardian submits a **promissory note** with concrete schedule of payment or post-dated check.

Unfulfilled promise to pay and returned check are also grounds for non-granting of exam permit in the next quarter.

Conforme:	Approved:
Parents' / guardians' signature over printed name(s)	Executive Director / Associate Director

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	Parents' / guardians' signature over printed name(s)		Executive Director / Associate Director