



# Registration Form

Name		Child's Name	
Billing Address		Email	
Session dates		8-Week session \$420.00	
<b>Preferred Payment Method</b>			
Pay Pal	€ Pay in Full (\$20.00 discount) Total \$400.00	€ Half down (\$210.00) Balance of \$210.00 due on or before orientation	PLEASE SEE PAY PAL LINK ON OUR WEBSITE: WWW.HopeDeliverySystems.com
Mail Payment Check or Money Order payable to Hope Delivery Systems, Inc.	€ Pay in Full (\$20.00 discount) Total \$400.00	€ Half down (\$210.00) Balance of \$210.00 due on or before orientation	HDS BILLING ADDRESS: 710 W. BUENA AVENUE 1W CHICAGO, IL 60613
Payment Plan	For payment plan option, please contact HDS office 312-985-7723		
		<b>Amount Due</b>	
		<b>Amount Paid</b>	
		<b>Total amount due</b>	
Signature		Date	