



## Abacus (Soroban) Application Form

Name \_\_\_\_\_ Nickname \_\_\_\_\_ Gender \_\_\_\_\_

School Name \_\_\_\_\_ Grade \_\_\_\_\_ Birth Date \_\_\_\_\_

Parent Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### Soroban Experience?

No  Yes  If yes, Years \_\_\_\_\_ Level (last achieved) \_\_\_\_\_

**Class Schedule:** Please check the classes you want to attend

**San Diego Class:** *Chinese Community Church: 4998 Via Valarta, San Diego, CA 92124*

Mon  3 - 4pm  4 - 5pm  
Wed  2 - 3pm  3 - 4pm  4 - 5pm  
Sat  10 - 11am  11am - 12pm  1 - 2pm  2 - 3pm

**Chula Vista class:** *1172 Battle Creek Road, Chula Vista, CA 91913*

Thu  3 - 4pm  4 - 5pm  
Sat  4 - 5pm

*\*\* Other time periods may be available upon request \*\**

**Registration Fee:** \$100 including abacus, \$80 without abacus

**Tuition:** Tuition shall be paid at the first class of each month

1 class/week: \$100 (1 hour), \$25 each additional class  
\$100 (45min) for Pre-K & Kinder, \$25 each additional class

Sibling discount: \$5 discount for the second child

Quarterly discount: \$5 discount/month for 3 month (Total \$15 discount)

Please submit completed application form with a check made payable to

**Wizard of Math**

to one of the above locations



## Authorization to Use Photographs, First Name, and Stories

- I authorize Wizard of Math to use my child’s photographs, first name, and stories **as indicated below** for educational and promotional purpose in any type of media, including the Wizard of Math website, blogs, and newsletters. The photographs, first name, or the stories may not be used for profit without my express permission. I understand that I will not be paid or rewarded for providing this authorization.

**Select authorized items:**

- Photographs**
  - First Name**
  - Stories**
- 
- I do **not** authorize Wizard of Math to use any of my child’s photographs, first name and stories for any educational or promotional material.

Child’s Name: \_\_\_\_\_

Print Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_