



SCHOOL CONTRACT

please fax back completed form to 805-823-4892 or email it to schools@kidzmet.com

School Name _____

Primary Contact Name _____

Primary Contact Email _____

Primary Contact Phone _____ Primary Contact Fax _____

Max Teacher:Student Ratio _____ Check to add Individual Classroom Accounts _____

Teacher Seats Contracted _____ Cost Per Teacher _____

Payment

Payment Method (circle one): Visa AmEx MC Check

Card Number: _____

Expiration Date: _____ CVV Code: _____

Name on Card: _____

Billing Zip Code: _____ Check # (if applicable) _____

School Location

Address _____

City _____ State _____

Zip Code _____

School Description (optional)

For Kidzmet Use Only

| | | | |
|--------------------|----------------------|----------------|----------------------|
| SCHOOL CODE | <input type="text"/> | EFFECTIVE DATE | <input type="text"/> |
| Teacher Seat 1 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 2 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 3 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 4 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 5 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 6 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 7 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 8 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 9 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 10 ID | <input type="text"/> | Teacher Name | <input type="text"/> |



PROGRAM CONTRACT

additional seats if needed

For Kidzmet Use Only

| | | | |
|--------------------|----------------------|--------------|----------------------|
| Teacher Seat 11 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 12 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 13 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 14 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 15 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 16 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 17 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 18 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 19 ID | <input type="text"/> | Teacher Name | <input type="text"/> |
| Teacher Seat 20 ID | <input type="text"/> | Teacher Name | <input type="text"/> |