Education NW Resources

Heritage Village North Shopping Center 9222 N Newport Highway, Suite D Spokane, WA 99218 (509) 323-4950

www.tutoringspokane.com

2018 Testing: CAT/5 Test Registration Form

Date:					
Parent(s) / Guardian(s) Names:					
Address:	City	City:		Zip Code:	
Phone #:	_ Cell Pho	one #:			
e-mail Address:					
Emergency Contact Name:		Phone #:			
*** Please let us know if your child nee	eds any special accor	mmodation	ıs. All ch	nildren need to read	independently.
Please call to make appointment for testing. Pre	ferred Test Date(s):				
Children Registering for Test: Name (First and Last):	Birthdate:	Grade:	Core/ Full Battery	Opti	ional Skill Gap Analysis CAT-5 (add \$10/ea)
	//		-	(choose for 2 day)	
	/				
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	//				
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CAT-5 Pricing: All Year Testing Loca	ntion: Education NW Re	sources			
Individual Testing: Core Battery: \$ 75 each	** Full Battery: \$ 90	each**			
Group Testing (of 3 or more): Core Battery: \$ (**optional: additional \$10 charge for Skill Gap				ation about skill gaps	in language/math)
Name on Credit Card (Please Print):					
Type of Credit Card (MC, Visa, or Disco	ver only):				
Credit Card #:Signature:		ecurity Cod	le (on ba	ck):	
Please enclose check (\$25 bank charge will a form to: Education NW Resource				•	•