

# SeaScape Private School

EMAIL: [INFO@SEASCAPECENTER.COM](mailto:INFO@SEASCAPECENTER.COM) PHONE: (805) 267-4818

Welcome to Seascape Private School! Please fill out and print the following forms and submit them via email, fax or mail at your convenience. If you have any questions, feel free to call or email.

I.) Agreement policy:

**\*\*IMPORTANT:**

**Please print out this form, sign and return the bottom portion of this page along with your enrollment forms.** This is to acknowledge that you have read and understand the SeaScape Private School policy information.

✂ Please cut along dotted line ✂

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I, the undersigned, have read, and hereby accept the information contained in the SeaScape Educational Center's online brochure, including the refund policy stated on the "Cost & Fees" page, and agree to its terms. I also understand that Seascape Private School's programs are considered a "full curriculum package" which includes tuition, and sold as such. If I, the undersigned, choose to pay the program in monthly installments instead of in full, all payment obligations must be met before I will receive any of the following: Transcripts, diplomas or graduating to the next grade level. Please note: After the initial 15 day refund period, the program is due and payable either in monthly installments or in full. Please be advised; if paying in installments, this contract is binding. If, for any unforeseen reason, you should choose to withdraw from the course, the remaining program fee will be due upon withdrawal notice.

NAME OF STUDENT: \_\_\_\_\_

PARENT OR GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

Signature of Parent or Guardian

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**ENROLLMENT FORMS CONTINUED:**

# SeaScape Private School

## Enrollment Form

Please print and mail, fax or email along with your down payment to the address below:

STUDENT FIRST NAME: \_\_\_\_\_

STUDENT LAST NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_

Has the student attended school before? Y/N

If yes what grades?

(Public) : K  1  2  3  4  5  6  7  8  9  10  11  12

(Private): K  1  2  3  4  5  6  7  8  9  10  11  12

STUDENT GENDER: M \_\_\_\_\_ F \_\_\_\_\_

STUDENT BIRTH DATE: \_\_\_\_\_

SEASCAPE ENTERING GRADE LEVEL: \_\_\_\_\_

IS THE STUDENT ENROLLING IN A SPECIAL NEEDS PROGRAM?:

Special Needs/Sight Impaired Program  Special Needs/Deaf Program

PROJECTED STARTING MONTH AT SEASCAPE: \_\_\_\_\_

LAST SCHOOL ATTENDED: \_\_\_\_\_

SCHOOL ADDRESS: \_\_\_\_\_

SCHOOL EMAIL TO REQUEST RECORDS: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: (required to receive invoicing, progress reports...etc): \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

EMPLOYER PHONE: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: (required to receive invoicing, progress reports...etc): \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

EMPLOYER PHONE: \_\_\_\_\_

BROTHERS/SISTERS: \_\_\_\_\_

DOES THE STUDENT HAVE A HEALTH PROBLEM? (Y) \_\_\_\_ (N) \_\_\_\_

IF YES, PLEASE SPECIFY \_\_\_\_\_

WHO WILL BE THE TEACHER? \_\_\_\_\_

HIGHEST LEVEL OF EDUCATION ACHIEVED?: \_\_\_\_\_

*If my application for enrollment in Seascope Private School is accepted, I will comply with all requirements regarding reports, fees, and instruction. I understand that failure to do so will result in the cancellation of enrollment and loss of credits.*

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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All textbooks, workbooks, teacher assistance, grading, shipping, and customized scheduling are included.

YEARLY FEES:

Grades K-6: (\$800.00 per year)

\$270.00 down payment at time of enrollment--9 monthly payments of \$60.00 thereafter.

Grades 7-8: (\$880.00 per year)

\$280.00 down payment at time of enrollment--9 monthly payments of \$70.00 thereafter.

Special needs/Deaf Program: (\$1500.00 per year)

\$500.00 down payment at time of enrollment--8 monthly payments of \$125.00 thereafter.

\*NEW\* ENROLLMENT ONLY OPTION:

CUSTOMIZED TEXTBOOK PROGRAM, PRIVATE SCHOOL ENROLLMENT, SHIPPING, AND DAILY SCHEDULE ARE INCLUDED.  
(NO GRADING/TEACHER ASSISTANCE)

Grades K – 6 (\$550 per year)

\$275.00 down payment at time of enrollment--2 monthly payments of \$128.00 thereafter.

Grades 7-8 (\$650 per year)

\$300.00 down payment at time of enrollment--2 monthly payments of \$175.00 thereafter.

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Check one of the following methods of payment:

*(Please make checks payable to: SEASCAPE EDUCATIONAL CENTER)*

Money Order: \_\_\_\_\_ Check \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Discover Card \_\_\_\_\_  
Amex \_\_\_\_\_ (A 5% processing fee will be added to all credit card transactions.)

Card Number: \_\_\_\_\_

Expiration: \_\_\_\_\_ Card Code: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Name On Card: \_\_\_\_\_

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

Grade Level: \_\_\_\_\_ Enrollment Only Option? Y \_\_\_ N \_\_\_

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# SeaScape Customizable Curriculum Form

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

Student Name: \_\_\_\_\_

Grade (this year): \_\_\_\_\_

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

If you'd like your child's curriculum customized, please answer the following questions and return this questionnaire to Seascape Educational Center along with your enrollment forms. (Not all subjects may be available at the requested levels.)

1. What levels in each subject do you feel your child would be most comfortable at?  
(✓check all that apply)

## GRADE LEVEL

Subject	Remedial	1 year below level	At current grade	1 year above current grade	Advanced	Other (Please Specify)
Math						
English						
Science						
Spelling						
Geography						
History						
Health						
Writing						
Penmanship						
Reading (Literature)						
Reading (Comprehension)						
Research & Study Skills						

2. Is there a subject not listed that you would like your child to learn? If so, let us know here:

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3. What special interests does your child have?

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4. What main goal would you like to see your child reach this year?

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5. Additional comments:

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6. Please let us know how you heard about Seascope Educational Center:

\*Recommended by a friend     The Link Homeschool Paper     Other Advertisement  
 Internet Search Engine     WWW Message Board     TV/Online Advertisement

\*Name of friend who recommended you to Seascope:

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So that we may process your request in a timely manner, please mail, fax or email the enrollment forms, customizable curriculum form and policy agreement, along with a check or credit card information to:

SeaScape Educational Center  
*Malibu Cove High School*  
235 Moorpark Rd Suite A 1014  
Thousand Oaks, CA 91360 USA

Email as an attachment to: [Info@seascopecenter.com](mailto:Info@seascopecenter.com)