

I have selected the following payment plan for the Dental Assisting Course:

FRIDAY       SATURDAY

\$4,395.00 on or before the first day of class (if paid 30 days prior to class there is a \$200.00 discount)

\$2,300.00 down payment, balance of \$2095.00 on 1st day of class.

\$2,300.00 down payment, then \$261.87 at the beginning of each class for a total of 8 payments This option includes a \$50.00 Administrative Fee.

A \$2,000 minimum down payment is required as soon as possible prior to the start of each class with any of the above plans to guarantee your place. Please complete the following to reserve a place in our next class:

Payment in Full (\$4,395)

Visa

Mastercard

AM EXP

\_\_\_\_\_ Down Payment

Check

Money Order

Discover

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CCV \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Social Security # \_\_\_\_\_

Name of last high school attended \_\_\_\_\_

City & State \_\_\_\_\_ Graduate? \_\_\_\_\_ GED? \_\_\_\_\_

Name of last college or vo/tech attended \_\_\_\_\_

City & State \_\_\_\_\_ Graduate? \_\_\_\_\_

Highest grade completed before enrollment \_\_\_\_\_

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We are committed to enrolling a diverse student body  
What race do you consider yourself to be? \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Phone # \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Email \_\_\_\_\_

Date \_\_\_\_\_

How did you hear about this course? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Refunds and Cancellations  
We are a licensed private vocational school for Dental Assistants in the State.  
Our program is licensed by the Work Force Board and therefore abide by all refund and termination policies regulated by the State.  
Work Force Board 128 10th Ave SW Olympia, WA 98504 (360) 586-8682. <http://www.wfb.wa.gov>