

ADDRESS ALL CORRESPONDANCE TO:**Temporary Mailing Address**

PO Box 1021
 Battle Creek, MI 49016
 Telephone #: (800) 818-1690
 Fax #: (888) 881-9801

SCHOOL OFFICE ADDRESS:

88 S. St. Andrews Dr.
 Ormond Beach, FL 32174
 Telephone #: (800) 818-1690
 Fax #: (888) 881-9801

Student Enrollment Agreement
HARRY WENDELSTEDT SCHOOL FOR UMPIRES
OPERATED BY NATIONAL LEAGUE UMPIRE HARRY WENDELSTEDT JR.

THIS AGREEMENT AND THE INSTITUTION'S CATALOG CONSTITUTE A BINDING CONTRACT
 BETWEEN THE STUDENT AND THE INSTITUTION.

STUDENT INFORMATION

NAME _____
LAST FIRST Called Name

DIPLOMA SPELLING _____ **BIRTHDATE** ____/____/____ **HT.** _____ **WT.** _____
Month Day Year

GENDER _____ **SOCIAL SECURITY #** _____

ADDRESS _____
STREET CITY ST ZIP

EMAIL _____ **HOME PHONE** _____ **CELL PHONE** _____

EMERGENCY CONTACT _____ **EMERGENCY NUMBER** _____

HEALTH CONDITIONS _____

UNIFORM SIZES: T-SHIRT _____ **POLO SHIRT** _____ **JACKET** _____ **PANTS** _____
M - 3XL M - 3XL M - 3XL Even 32 - 50

All students who complete our program will receive a diploma stating that they completed a program in professional Baseball Umpiring. 245 Class hours are required to graduate. Students must score 70% or (C) average or more on written tests in order to qualify for professional baseball. The Umpire School supplies all umpire equipment and materials for the school term. Students will be provided Cap, Rule Book, Uniforms, Rule Index, etc.

Students under the age of 18 will not be accepted. Any applying student rejected on enrollment by school receives a full refund. Students will be dismissed for breaking school rules or misconduct. Any student dismissed for these reasons will be afforded a refund noted in the Cancellation and Refund Policy listed on page 2.

PROGRAM INFORMATION

Program Title: Professional Baseball Umpiring Clock Hours: 245

Class Schedule: (X) full time () part time (X) Day Classes (X) Evening Classes
 Class operates 6 days per week, 8:30 a.m. until 6:00 p.m. - Some night classes.

Various Start Date: 01/03/17 Anticipated Ending Date: 02/04/17

Tuition \$ 1875.00
 Reg. Fee \$150.00 (non-refundable)
 Tech. Fee \$75.00 (non-refundable)
 Ump. Sch. Pkg. \$350.00 (non-refundable)

Room Options \$ _____ Insert \$750.00 for Double-Occupancy or \$1500 for Single-Occupancy, If Applicable
Meal Plans \$ _____ (non-refundable) Insert \$775.00 for Full Meal Plan or \$225.00 for Lunch Only, If Applicable
Total Costs \$ _____

METHODS OF PAYMENT

- Full payment at time of signing enrollment agreement.
- Registration fee at the time of signing enrollment agreement with balance paid prior to program start date

(Any late fee payments and conditions thereof must be disclosed on the enrollment agreement and in the catalog)

All prices for program are printed herein. Contracts are not sold to a third party at any time. Cashiers and Certified Checks accepted any time. Master Card, VISA, American Express, and Discover Card accepted with 2.9% surcharge of total costs. Personal Checks only accepted for deposits paid prior to, and cleared before, registration day.

*****CANCELLATION AND REFUND POLICY*****

Should a student's enrollment be terminated or cancelled for any reason, all refunds will be made according to the following refund schedule:

1. Cancellation can be made in person or by Certified Mail.
2. Should an applicant be rejected for any reason, a full refund will be made, including all deposit amounts.
3. Cancellation after the payment of deposit, but before registration day, results in a refund of all monies paid, with the exception of the registration fee (not to exceed \$150.00). Registration fee is fully refundable if cancellation is made within three business days in accordance with this policy.
4. Cancellation after attendance has begun, but prior to 40% completion of the program, will result in a Pro Rata refund of tuition costs, room rent, additional room options, taxes and insurance, course materials (\$2525.00) computed on the number of hours completed to the total program hours.
5. Upon arrival to school the first day of the course, students will not be afforded a refund for the Registration Fee (\$150.00), Umpire School Packet (\$350.00), Technology Fee (\$75.00), or for any selected Meal Plan; except that a student that initially registers with the school within three business days of the program's start will be afforded a full refund of the Registration Fee (\$150.00) if they request a refund within three business days of enrollment.
6. Cancellation after completing 40% of the program will result in no refunds whatsoever.
7. Termination Date: In calculating the refund due to a student, the last date of actual attendance or the date of cancellation by the student, whichever the latter, is used in the calculation unless earlier written notice is received.
8. Refunds will be mailed within 30 days of termination of student's enrollment or receipt of Cancellation Notice from student.
9. Under no circumstances will the 2.9% surcharge for online or credit card payments be refunded.

GROUNDINGS FOR TERMINATION

A student's enrollment can be terminated at the discretion of the institution for insufficient academic progress, non-payment of academic costs, or failure to comply with rules and policies established by the institution as outlined in the catalog and this agreement. Any student dismissed for these reasons shall be afforded a refund in accordance with the refund schedule.

EMPLOYMENT ASSISTANCE

Although placement assistance may be offered, the institution does not guarantee employment implied or indirectly implied.

ACKNOWLEDGEMENT

This document and the catalog are a binding contract between the institution and applicant and no further modification or representation except as herein expressed by both parties will be recognized.

CREDENTIAL AWARDED

Upon satisfactory completion of the program the student will be awarded a Diploma

*****DO NOT SIGN THIS CONTRACT BEFORE YOU HAVE READ IT OR IF IT CONTAINS ANY BLANK SPACES. ALL SIGNERS HAVE RECEIVED AND READ A COPY OF THE BINDING DOCUMENT AND CATALOG.*****

Signature of Applicant Date Signature of Parent/Guardian Date
(if necessary)

By checking this box, I certify that I am at least 18 years of age by the date of the above signature.

Signature of School Official Date

For Administration Use Only

Total Costs \$

Deposit Received \$

Balance Due \$

**Licensed by: Commission for Independent Education, The Florida Department of Education
325 West Gaines St., Suite 1414
Tallahassee, FL 32399-0400
(850) 245-3200 or Toll Free 1 (888) 224-6684**