



**Costs:** Registration Fee due with application ...\$100.00  
 Balance of Tuition due May 15, 2009...\$350.00  
 Balance of tuition due date ..... May 15, 2009

**2009 Rx for Discovery Reading®– Course Schedule**

**Attendance is required at all sessions**

|              |                                 |
|--------------|---------------------------------|
| 8:30-4:30    | Monday and Tuesday , August 3-4 |
| 8:30 – 12:30 | Wednesday, August 5             |

**Course Enrollment & Cancellation Policies:**

These policies are to be reviewed by all applicants. NILD suggests that you make a copy of your completed course application and retain it for your records.

1. I am enrolling in *NILD Rx for Discovery Reading® training*. I agree to pay all applicable course fees as given above.
2. Buyer’s Right to Cancel Statement:
  - I may cancel this agreement without penalty within 3 business days of registering.
3. Refunds:
  - Refunds made upon request.
  - After the 3-day Buyers Right to Cancel period and up to May 15, 2009, NILD will refund all course fees (registration and tuition, if paid) minus a \$150.00 cancellation fee.
  - From May 15, 2009 through July1, 2009, none of registration fee will be refunded.
  - After July 31, 2009 no course fees will be refunded.

| Within 3 days of registration:    | Day 4 through May 15, 2009                           | May 15, 2009 through July 30, 2009         | After July 31, 2009          |
|-----------------------------------|--|--|------------------------------|
| Full refund, no cancellation fees | Refund of course fees less \$150.00 cancellation fee | Refund of course fee less registration fee | No refund of any course fees |

Acknowledgement of Cancellation Policies:

*To cancel this transaction I am to provide notice of my cancellation to NILD via mail, email, fax, hand-delivery, or telephone call. I have reviewed, understand, and will abide by the above cancellation policies.*

\_\_\_\_\_  
 Signature of Applicant Date

**Mail this application and all course fees to NILD.**

**Rx for DISCOVERY READING® TRAINING 2009**

**Course Fees** – Registration due with application. All other fees due 5/15/09.

Registration Fee (**\$100**) \_\_\_\_\_

Tuition (**\$350**) \_\_\_\_\_

**FINANCIAL INFORMATION**

Total Course Fees Due \_\_\_\_\_

**TOTAL COURSE FEES ENCLOSED** \_\_\_\_\_

|  |  |
|--|--|
| <input type="checkbox"/> Check enclosed. <i>Please add figures carefully and make check payable to NILD in U.S. currency only.</i> |  |
| <input type="checkbox"/> Charge \$_____ to my: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard                   |  |
| Account Number: _____  |  |
|  |  |
| <b>Cardholder Name</b> (please print)  | <b>Expiration Date</b>                   |
| <b>Signature</b> (required when using credit card)   | <b>V Code</b> (3 digits on back of card) |
| <b>Credit Card Billing Address</b> (required – include zip code)   | Office Use Only                          |