

GRE GMAT LSAT

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Please cut here and send this registration form with your check made out to **Daedalus Education Services, 305 Bryan St, Havertown, PA 19083**

Name (print or type): _____ Email: _____

Address: _____

Telephone: (Day) _____ (Eve) _____ (Cell) _____

Please enroll me in the: **First Choice** (Course Date) _____ **Second Choice** _____ at (location) _____

_____ **Accept my full tuition of \$995.00 for (circle one)** **GRE** **GMAT** **LSAT**
for First Choice (Course Date) _____ **Second Choice** _____ at (location) _____

_____ **Accept my payment \$695.00 for application development assistance.**

(Deposits are refundable up to one week prior to the start of class. A \$100.00 deduction will be made from refunds on advance tuition paid in full when cancellation occurs in the week prior to course start.)

Signature: _____ Date: _____

NOTE: All information on this form will be kept in confidence. All courses subject to sufficient enrollment. Location and schedule subject to change.

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