



Kristen Stevenson, LLC
11413 E Raintree Dr
Scottsdale, AZ 85255
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Mathematics Registration Form

Student Name: _____

Student Start Date: _____ Student Grade Level: _____

Student Cell Phone: _____

School Student Attends: _____

Rate: \$55 per ½ hr private rate,
minimum twice per week.
Tuition is paid on the first class
of the month.

Parent/Guardian #1 Name: _____ Cell Phone: _____

Relationship to Student: _____ Email: _____

Salutation (Please Circle): Dr. Mrs. Ms. Miss Mr.

Street Address: _____

City: _____ Zip Code: _____

Parent/Guardian #2 Name: _____ Cell Phone: _____

Relationship to Student: _____ Email: _____

Salutation (Please Circle): Dr. Mrs. Ms. Miss Mr.

Street Address: _____

City: _____ Zip Code: _____

2025-2026 Policies and Procedures(Please initial each)

- ____ 1. Classes will be held in Classroom 2 of the Arabian Library, 10215 E McDowell Mtn Ranch Rd
- ____ 2. Library rules and hours are observed, and closing is promptly at 6PM.
- ____ 3. Monthly tuition is due by the 1st class of the month, payment by check or Zelle accepted
- ____ 4. 30 day notice required for cancelling your placement.

Parent Signature: _____

Date: _____