2026
FALL SAT PREP COURSE
ENROLLMENT AGREEMENT/APPLICATION

First-come, first served

DATE: _____

STUDENT'S NAME: _____

ADDRESS: _____

_____

SCHOOL: _____ **YEAR OF GRADUATION:** _____

MATH CLASS CURRENTLY ENROLLED IN: _____

PARENT(S)/GUARDIAN(S): _____

Best Phone Number To Reach Parent At: _____

This Phone Number Is: Home _____ **Work** _____ **Cell** _____

Student's e-mail address: _____

Parent's e-mail address: _____

COURSE FEE: **Shrewsbury residents: $310.00**
Non-Shrewsbury residents: $335.00
Fee includes all materials

Make checks payable to: Town of Shrewsbury (SHS SAT Prep Course in memo)

PARENT/GUARDIAN SIGNATURE: _____

Send application and payment to:
Shrewsbury High School
Attn: Jen Lundsten
75 Cypress Avenue
Shrewsbury, MA 01545