

Part-Time Member Application

Youth Name:	Date of Birth:	
Address:		
Youth Email:		
Home Phone:	Youth Cell Phone:	
Parent Name:	Parent Name:	
Address:		
Cell Phone:		
Email:	Email:	
	/hich two-day option are you interested in (please circle)? y & Tuesday / Tuesday & Thursday	
When is the youth interested to begin?		
How did you learn about us?		
What attracts you most to the learning coopera	ative?	

You can return your completed application in-person, attached to an email to <u>info@raritanlearningcooperative.org</u>, or via mail: Raritan Learning Cooperative, 168 Main St, Flemington, NJ.

Youth Questionnaire

This section should be completed by the potential member. If more information about how the learning cooperative works would be helpful in answering the following questions, please see the center's website (How It Works) or learningcooperatives.org (Self-Directed Learning, Guiding Principles, Paths Forward).

Youth Name:		
	e answer the following questions either here or on an attached page: Why are you interested in joining the learning cooperative? Why do you think joining the learning cooperative would be good for you?	
2.	Please describe what you've liked and/or disliked about your past schooling or homeschooling.	
3.	What are the main priorities for your own learning and education?	
4.	What interests do you have? What do you like to do? What do you care about?	

Parent Questionnaire

4. What interests does your child have?

If more information about how the learning cooperative works would be helpful in answering the following questions, please see the center's website (How It Works) or learningcooperatives.org (Self-Directed Learning, Guiding Principles Paths Forward).		
Parent Name:		
Please answer the following questions either here or on an attached page:		
1. Tell us about your child. Personality? Challenges? Ambitions?		
2. Why do you think the learning cooperative would be a good fit for your child's needs?		
3. Describe your child's prior schooling or homeschooling. What worked? What didn't work?		

Membership Fees

Two-Day Part-Time Fee for 2025-2026: \$10,400

<u>Billing</u>: Upon enrollment, members are required to provide a \$1,000 non-refundable deposit. The balance of the fee is paid in two equal installments due August 15th and January 15th. If you need a more flexible payment schedule, please include that in the additional information section below.

<u>Refunds</u>: No refunds are made to members who choose to terminate membership or whose membership is terminated for cause or disciplinary reasons during these billing cycles unless a specific arrangement is acknowledged by the learning cooperative.

<u>Pro-Rated Fee</u>: For members who join during the academic year, the fee is pro-rated. The first payment is due upon enrollment.

<u>Fee Reductions</u>: We offer fee reductions for full-time memberships. We are committed to making sure that The Learning Cooperatives are economically diverse and therefore offer fee reductions for full-time memberships based on need if and when the full fees are simply impossible for a family to pay. Families may enroll in the full-time program and elect to attend part-time on whichever days they choose. If you are interested to apply for fee reductions, please see our full-time application on the <u>Join page</u> of our website.

The Learning Cooperatives are a 501c3 tax-exempt organization. We accept tax-deductible donations to support economic diversity at our centers. If you know someone who would like to support us in our mission, or if you would like to make a donation yourself, please be in touch.

Signature:	Date: