



Fee structure and terms

1. The fee for specialist teaching is \$65 per hour.
2. The fee for specialist teaching with Dr Godfrey is \$75 per hour.
3. Literacy assessments are \$180.
4. Teaching fees are **due on the day** by electronic transfer or cash.
 - a. Should an account be more than two payments in arrears, lessons will cease until the outstanding account is paid.
5. Fees will be charged for unattended lessons. Where 24hrs notice or a doctor's certificate are supplied, no fee will be charged. Zoom will do its best to reschedule missed lessons.
6. Teaching will **not** take place on public holidays.
7. School holiday lessons are by arrangement and payable on the day.
8. If Zoom cancels a lesson and the lesson cannot be rescheduled no charge will be applied.
9. Teaching for the school year will **commence in Week 2 of Term 1** and **conclude in the second last week of Term 4**, however, this is negotiable.
10. Invoicing of students eligible for financial assistance through Veterans' Affairs, DSF, or the Department of Child Protection will be made **directly to the relevant department**.
11. Low-income families can apply for financial assistance through Dyslexia SPELD Foundation. Please contact DSF for details.

Please ensure that your child is ready for their session. Toilet breaks, hunger, thirst, or other distractions can detract from an optimal learning experience.

I, (Print Parent or Guardian's Name below):

agree to the terms of enrolment with Zoom Tutoring as stated above.

Signed: _____

Date: ___ / ___ / _____

Thank you for choosing Zoom Tutoring.

Dr Joanne Godfrey MACE
Specialist Teacher
0437 515 616



Student's biographical information/ CONFIDENTIAL

DSF Membership #: _____ If not currently a member, do you intend to join? Y / N

How did you hear about our services? _____

Student's name: _____ Gender: M / F

Date of birth: _____ Age: _____ Year level at school: _____

Name of school & teacher: _____

Hearing difficulties: _____

Date of last hearing test: _____

Vision difficulties: _____

Date of last vision test: _____ Glasses: Y/N

Has the student had an assessment by a psychologist? Y/N Date of assessment: _____

Please circle any relevant learning difficulties: dyslexia, dyspraxia, dyscalculia, autism, ADD, ADHD.

Other: _____

Has the student had any previous tuition? Y/N Details: _____

Allergies: _____

Other relevant medical information: _____

Method of payment (please circle): Cash Direct Deposit (see details below)

Parents' names: _____

Address: _____

Phone number: (H) _____ (M) _____

Parent's e-mail: _____

Parent's signature: _____ Date: _____

Thank you for choosing Zoom Tutoring.

BSB: 036 087

Account Number: 734 385

Dr Joanne Godfrey MACE

Specialist Teacher

0437 515 616