



RAY OF HOPE EDUCATIONAL SERVICES, LLC d/b/a

## RAY OF HOPE ACADEMY

634 Main Street, Belgium, WI 53004

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### AUXILIARY CLASS ENROLLMENT FORM

#### SCHOOL YEAR 2026

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ (Home); \_\_\_\_\_ (Cell)

Do you text? ☐ Yes ☐ No

Email \_\_\_\_\_

Class Title: \_\_\_\_\_

**Class Fee: \$** \_\_\_\_\_ \$450.00/class (2 day classes) \*Early Bird \$385.00  
\$325.00 (2 day classes ROHES Graduates)  
\$395.00/class (1 day class); \*Early Bird: \$330.00 (1 day class)  
\$300.00 (1 day class ROHES Graduates)  
\$200.00 (1/2 day class); \*Early Bird \$185.00 (1/2 day class)  
\$150.00 (1 day class ROHES Graduates)

Date(s): \_\_\_\_\_

Location(s): Belgium or Port Washington, Wisconsin

**\*NOTE: Early Bird is three weeks prior to a class unless otherwise noted. EB excludes Graduates.**

***This completed form must accompany payment. Payment will be accepted in the form of Cash, Check, Zelle, Venmo, Money Order (payable to Ray of Hope Educational Services, LLC), Credit/Debit Card Payment. Cash payments are to be made in person only. If Ray of Hope Academy cancels a class, your tuition will be refunded. Students, who do not show up for a class, will not be refunded. A 3.5% Fee will be added to Credit Card and Debit Card payments. Student will be responsible for any returned bank fees.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Credit Card Information:

Type of Card: VISA, MC, AMER EX, DISCOVER, (Circle one)

Name on card \_\_\_\_\_

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV# \_\_\_\_\_ Zip Code: \_\_\_\_\_