

# **ACT Prep Plus Registration Form**

## **Student Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## **ACT Prep Course**

Session: \_\_\_\_\_

School: \_\_\_\_\_

Return this registration form and a check (\$135) payable to ACT Prep Plus to:

Sid Truckenbrod  
W149 N7570 Sylvan Lane  
Menomonee Falls, WI 53051