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Dedicated to learning.®

Group Registration Cover Letter

(Please print clearly)

If you are gathering a group to enroll in Learners Edge Courses, please designate a leader and fill out this form to ensure the appropriate group discount is applied to all participants.

Name of Group Leader: _____

Group Leader Contact Information: _____

Phone

Email Address

Group Price Category: (please indicate) Group of 2-4 Group of 5-9 Group of 10+

Number of Registrants: _____

Names of Registrants: _____

Date Mailed/Faxed: _____

For office use only:

Approved: _____

Please **fax** Cover Letter with ALL group registrations to: **952-469-2790**
(credit cards only) OR

Mail with ALL group registrations to:

Learners Edge
2805 Dodd Rd #200
Eagan, MN 55121