

Welcome to Hill's Music Shoppe

Please read, initial, and sign the following policies before completing this form.

TUITION POLICY

- Lessons are \$75 a month, per 30 min. time slot. Lesson tuition is accepted in monthly payments and based on an Annualized Attendance Schedule. You will receive a calendar of planned closures or absences from your teacher
 - There is a one-time \$25 Registration Fee due at the time of sign-up.
 - You will need to purchase beginner books for your respective teacher, or provide a book deposit.
- Monthly Lesson Fees are **paid in full by the 1st lesson of each month**. Accounts that are not paid in full by the 10th will be subject to a \$10 late fee, or will be subject to removal of student from the lesson schedule. You will still be responsible for any unpaid tuition before you can be put on the schedule again. **We offer the option of Automatic Payments by credit/debit or bank draft at no additional fee.** _____ **Initial**
- **Your monthly fee pays for your reserved time slot, held specifically for you! Missed lessons due to scheduling conflicts or unexpected events by the student, are not refundable.**

_____ I have read and understand the tuition policies above.

CANCELLATION-MAKE-UP POLICY

- **No Refunds or lesson credits** for student cancelled lessons.
- The instructor will issue you a credit for **instructor absences** to the next month for tuition already paid. Each teacher will provide a calendar or Annual holiday and scheduled absences.
- A written notice, 30 days ahead of terminating lessons is necessary to discontinue lesson payments, and stop the billing process. No fees will be refunded if lessons are terminated in the middle of a month.

_____ I have read and understand the cancellation – make-up policy above.

Initial

SICK POLICY AGREEMENT: I/we agree NOT to attend our lessons when we are sick and symptoms have **not cleared within 48 hours of your private, close-proximity, lesson**. This is an agreement between the student/parent and teacher to avoid contaminating the studio area and lesson room with any sickness/virus, as it may quickly spread to other people. We also agree that we come to our lessons at our own risk, understand the studio area is cleaned regularly, but can't be guaranteed of any outcome, and will not hold the teacher/studio/store responsible. Zoom or Facetime virtual lessons can be arranged when one still has symptoms but wants to take their lesson.

_____ **Initial: I agree to the sick policy.**

_____ **I agree to abide by the Studio Policies provided:**

Signature (Parent or Guardian for a student under 18)

Date

Student Name (please print)

Date of Birth

ACCOUNT #

Parent or Guardian Name

Work Phone Number

Yes ___ No ___
Can you receive calls at work
if your instructor is absent?

Street Address

Home Phone Number

City

Cell Phone Number

\$25.00
Registration Fee

State

Zip

Email

\$30.00
Book Deposit

<i>Instructor</i> _____	<i>Day</i> _____	<i>Start Date</i> _____	<i>Time of Lesson</i> _____	<i>to</i> _____
<i>Private Lesson</i> _____	<i>Type</i> _____	<i>Tuition \$</i> _____	<i>per lesson</i>	
<i>Instructor Phone</i> _____	<i>Instructor Cell</i> _____	<i>Instructor Email</i> _____		