

Studio Policy Summaries:2014

Student Name _____

Details are available on www.pbsdance.com

Release of Liability

As the legal parent or guardian, I release and hold harmless Pat Brown School of Dancing, its owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of Pat Brown School of Dancing, its owners and operators or in route to or from any of said premises.

____ I've read the above and agree.

Medical Emergency

The undersigned gives permission to Pat Brown School of Dancing, its owners and operators to seek medical treatment for the participant in the event they are not able to reach a parent or guardian. I hereby declare any physical/mental problems, restrictions, or condition and/or declare the participant to be in good physical and mental health. I request that our doctor/physician _____ be called and that my child be transported to _____ hospital. Please include physicians' phone number _____

____ I've read the above and agree.

Enrollment policy

As in any private school, I am enrolling for the entire season, and have the advantage of paying in 10 monthly installments due in advance on the first of each month. Whether a given month includes two lessons or five, I will be responsible for the entire month's tuition payment. There are no refunds for absentee lessons..

____ I've read the above and agree.

Payment Information

Payment options are as follows:

I can make payments at the studio with cash, check or debit/credit card. If my account payment is not received in the office by the 15th of the month I will be charged a \$5.00 service fee. A returned check will be charged a \$20.00 returned check charge and will be added to my account

1. I can make payments each month on-line with credit/debit cards or bank drafts. If my account is not paid by the 15th of the month I will be charged a \$5.00 service fee. All charges will appear as being from Pat Brown School of Dancing. I understand Pat Brown School of Dancing will charge my account a \$20 fee for any non sufficient funds payments.
2. I can make payments by Automatic Monthly Direct Payment. (Debit/credit/checking) Tuition will be debited the first of every month. This type of payment must be set up in the office. All charges will appear as being from Pat Brown School of Dancing. I hereby authorize Pat Brown School of Dancing to charge my account a \$20 fee for any non sufficient funds payments.
3. . Payment **plans must be acknowledged and paid by Aug. 30, 2014** in order to receive the discounts

____ I've read the above and agree

Student Name _____ (cont.)

Withdrawal and Refunds

To withdraw from any classes I must inform the studio in **writing** and turn it in to the studio office 7 days before the end of a month. All automatic bank debit and credit card charges will stop after the one-month notice period. I realize that PBSD will continue to charge my card for any and all charges related to my child until this written notification is received.

___ I've read the above and agree.

Parental Responsibilities

It is my responsibility to be aware of all school activities, such as viewing days, recitals, extra classes, and dates the school is open or closed. Announcements of Events, Make-up classes etc. will be posted on the bulletin board, on-line (www.pbsdance.com) under "Studio News" and by e-mails. It is my responsibility to regularly check these boards (at the studio and online) to ensure I am informed. It is my responsibility to inform the school of any address, telephone, or email address change.

Care of students: The studio is not responsible for providing care before or after any class. Students are not to be left at the studio for excessive time before or after class. Students should not arrive earlier than 10 minutes prior to their class and must be picked up within 15 minutes after their class has ended. Parents should remain with student when they are not in class,

Damage to studio property, caused by any student will be the responsibility of the parent to pay for or replace damaged items.

___ I've read the above and agree.

Photo Release

Photo Release: I give permission to Pat Brown School of Dancing to take photos of my child to use in brochures, studio web site, posters, advertisements, or other promotional material. I understand their names will not be used.

___ I've read the above and agree.

Missed Lessons/ Cancellations

Financial refunds or credits are not given for missed lessons. Students may make up lessons missed due to sickness, in a similar class, within two weeks of the absence. There will be make-up lessons if lessons are missed due to teacher's illness. There are two weather days built in for each class during the year. Any additional class missed after two will be made up by the dance studio. In the case of inclement weather please call the studio for a voice mail greeting informing you of any changes in our class schedule for that day. We will send cancellation notification by e-mail, T.V (wbbj) and radio (101.5).

___ I've read the above and agree

Signature _____

Date _____