



# TUITION CHART



## CLASSES

# of hours	Monthly Fee	Early Bird Discount Amount*
.75 (45 minutes)	\$40.00	\$306.00
1.5 hours	\$60.00	\$459.00
2.25 hours	\$90.00	\$688.50
3.0 hours	\$110.00	\$841.50
3.75 hours	\$120.00	\$918.00
4.5 hours	\$130.00	\$994.50
5.25 hours	\$140.00	\$1,071.00
6.0 hours	\$150.00	\$1,147.50
6.75 hours	\$160.00	\$1,224.00
7.0 hours	\$170.00	\$1,300.50
UNLIMITED	\$200.00	\$1,530.00 (Save \$270!)

*Early Bird Discount applies when yearly fees are paid in full prior to October 13th.*

## PRIVATE LESSONS

# of hours	Fees
30 minutes	\$25.00
1.0 hour	\$60.00

*\*ALL fees for private lessons must be paid prior to attending the lesson.*

## SOLOS & DUET/TRIO

\*Please refer to Solo & Duet/Trio Tuition Chart

- \* A non-refundable Registration Fee of \$40.00 must be paid and a Registration Form must be filled out completely before you attend class.
- \* All boys/male students register FREE and receive ½ off Total Monthly Tuition. (This EXCLUDES PRIVATE LESSONS & SPECIALTY CLASSES)
- \* An initial \$10.00 will be deducted from the Total Monthly Tuition of any additional family members.
- \* **Each student may use ONLY one discount at the time of payment.**
- \* Payments may be made by cash, check, direct deposit into our Wells Fargo account, or at [www.starsoftomorrowdancestudio.com](http://www.starsoftomorrowdancestudio.com) via PayPal. (Exception: If paying entire year and receiving the Early Bird Discount, please pay at the studio). A \$35.00 service charge will be imposed for all returned checks. *(After a check has been returned to our business, you must pay in CASH only).*
- \* Performing Team Members must take of minimum of 4 hours per week.
- \* Tuition remains the same whether it is a long (5 week) or short (3 week) month and regardless of absences. It is payable monthly in advance, and due at the first lesson of each month. Reminders will not be sent out unless you are past due. There will be a late fee of \$10.00 if paid after the 10th of the month and \$15.00 after the 20th.

**ALL FEES ARE EXPECTED TO BE PAID ON TIME.**



# REGISTRATION FORM 2020-21



Dancer's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

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

This will be my \_\_\_\_\_ year at Tammy Arrowood's S.O.T. Shirt Size: YS YM YL YXL AS AM AL  
*Circle one of the above*

Parent's Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email (please print): \_\_\_\_\_

Confirm Email (please print!) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Important Medical Information (allergies, etc): \_\_\_\_\_

I understand and acknowledge that there is a risk of injury inherent in dance activities and that personal injury or damage to property may result during participation in dance and related activities. I represent that my child is physically able to safely participate in dance and related activities. I agree to assume all risks associated with my child's participation in dance instruction, rehearsal, performance and related activities. In consideration of receiving instruction at Tammy Arrowood's Stars of Tomorrow, I hereby waive, release and discharge all present and future claims and liabilities of any kind, whether for bodily injury, property damage, or other loss, arising out of my child's participation in dance and related activities, including but not limited to dance instruction, rehearsals, and performances, whether conducted on or off studio premises. I also acknowledge that I am responsible for delivering my child to the studio and picking her/him up and that the studio is not responsible for a child that leaves the premises. If parent or Emergency Contact cannot be reached in case of an emergency, consent is given for my child to receive medical or surgical care as recommended by the physician or hospital.

I have read this release, understand it, and hereby agree to its terms. I also consent to photography and recording of my child for its usage in promotional and public relations activities. All recordings are property of Tammy Arrowood's Stars of Tomorrow.

I have received the Tammy Arrowood's Stars of Tomorrow Payment Chart and 2020-2021 Studio Calendar and agree to the terms regarding all related program fees and deadlines.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

CLASS \_\_\_\_\_ PREFERRED DAY/TIME \_\_\_\_\_

For Office Use Only Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_