

**PARENT'S STATEMENT OF COMMITMENT  
T.A.P. DANCE PROGRAM 2016-2017**

The Troy Arts Program (T.A.P.) was started as an outreach of the Troy Mills Christian Church. The program is a cooperative of parents interested in providing the children of the area with dance instruction. We are a non-profit organization.

I have discussed to my satisfaction with the Teacher(s) and Advisory Board Representative(s) the obligations and opportunities involved in registering for this year's Dance Program.

After consideration and discussion with my child, as well, I am agreeable to the following commitment on behalf of our family:

*Dance classes begin Monday, September 19, 2016*

**Tuition:**

Registration/Recital Fee - \$25.00 per child enrolled in dance classes due at registration

We will remit \$24.00 per month for weekly classes.

2- student/classes	\$42.00	3- student/classes	\$52.00
4- student/classes	\$62.00	5- student/classes	\$72.00
6- student/classes	\$82.00	7- student/classes	\$92.00
8- student/classes	\$102.00	9- student/classes	\$112.00

We understand that:

1. **Tuition is due the first** of each month.
2. **Tuition is due regardless of missed classes** due to other extra-curricular activities in which my child participates (school, scouts, etc).
3. **Tuition** needs to be clearly **labeled** with **month** for which it is remitted indicated as well as the **student's name** noted.
4. Accounts **must be kept current**, after 60 days a reminder note will be sent home with your child. The T.A.P Board is asking that all accounts be paid in full by **April 1<sup>st</sup>, 2017**, to be eligible for the dance recital.
5. If it becomes necessary during the year for my **child** to **withdraw** for any reason, I will discuss intentions with the Teacher(s); I will also expect that my concerns about my student's progress may be discussed with the Teacher(s) at any time. Tuition will still be charged until **written notification** is received by the Teacher(s) or T.A.P Treasurer/Board of Directors.

**Make-Up Policy:**

1. It is **T.A.P's obligation** to make up any classes that are missed by the Teacher(s)
2. It is the **student's responsibility** to discuss with the Teacher(s) the necessity for make-up lessons due to the student's absence.
3. **Weeknight weather cancellation:** If North Linn Schools have cancelled classes or evening activities on a weekday – There will be NO dance class that evening.

I understand that participation in the recital at the season end is not mandatory, but encouraged.

**I understand:** TAP is a coop of families dedicated to bringing dance education to the youth of our communities.

I agree that the excellence and goodwill we all desire depends upon clear communication and a spirit of involvement.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### Registration Form

Parent Name \_\_\_\_\_ E- Mail Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

#2 Student Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

#3 Student Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

#4 Student Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_

Class \_\_\_\_\_ Night \_\_\_\_\_ Time \_\_\_\_\_