



Consent and Agreement Form

I understand the opportunity awaiting my child, _____ (please print student's name), as a member of the *Tacoma Youth Symphony Association*. If he/she accepts placement into one of TYSA's orchestras, we agree to abide by the *Expectations, Policies & Regulations, Attendance Requirements* and *Financial Obligations*.

Tuition: I agree to pay membership tuition for participation in the *Tacoma Youth Symphony Association* by making a deposit as indicated below by September 1, 2020 and then the balance by September 26, 2020 at the discounted *Early Bird* rate; OR by making a DEPOSIT as indicated below by September 1, 2020, followed by automatic monthly payments of \$145 on October 1, November 1, December 1, January 1, February 1, and final payment on March 1 to be adjusted according to my balance at that time. Payments will be charged to my credit card or debit card automatically. All payments are per child. All accounts must be current at each concert date in order for the student to be eligible to play in the concert. Tuition charges can be found on the website. Students who join late will be charged pro-rated tuition. Invoice will follow placement letter. _____ **(parent's initials)**

TYS: \$330 deposit

TYAO: \$305 deposit

TJYS: \$280 deposit

TSP: \$215 deposit

TSS: \$180 deposit

Music Policy: I understand that music is to be turned in immediately following the end of each concert in the folder that was issued. If music is not turned in, I agree to pay a fine of \$7 for each piece that is not returned within 30 days of the concert. There will be a \$5 fine for missing Glaesel folders and a \$20 fine for missing or damaged TYS black folders. _____ **(parent's initials)**

Absences: The *TYSA Attendance Policy* is strictly enforced. I agree to call the Rehearsal Assistant prior to any absence and to complete & return a *Notification of Absence from Rehearsal* for each absence. This form can be submitted through the TYSA website. Letters to parents *confirming* absences will be sent after multiple absences. _____ **(parent's initials)**

Concert dress: I understand the required concert dress for my child's orchestra as outlined below. _____ **(parent's initials)**

TYS & TYAO

Ladies: Black Dress--*Angelique Preferred Fabric* purchased at www.tuxedowholesaler.com, black pantyhose, black dress shoes, no jewelry. **Gentlemen:** Black Tuxedo, white long-sleeved tux shirt, black bow tie, black cummerbund, black socks, black dress shoes.

TJYS, TSP, TSS

Ladies: White long-sleeved tuxedo shirt, long black skirt --*Symphony Concert Skirt* purchased from www.tuxedowholesaler.com, black pantyhose, black dress shoes, no jewelry. **Gentlemen:** Black Dress Slacks, white long-sleeved tuxedo shirt, black bow tie, black socks, and black dress shoes.

Withdrawal: Please submit in writing to the TYSA office of your child's request to withdraw (including non-acceptance) from the TYSA. The day your letter with *guardian signature* is received by TYSA will be the official withdrawal date. Phone calls to the TYSA office or the Rehearsal Assistant to request withdrawal will not be accepted. Possible refunds will be on a case-by-case basis. No refunds after March 1st. There will be no refund of the audition fee if you do not accept placement.

I/we give permission to the *Tacoma Youth Symphony Association* to **photograph** my/our child(ren) for in-house photos, websites and publicity releases. I further agree to submit in writing a request to not be included in the association Handbook that includes contact information for each student/family. Additional policies and details of membership are contained in the *Tacoma Youth Symphony Season Membership Information*. Based on the above agreement, I give permission for my son/daughter to audition for placement in the *Tacoma Youth Symphony Association*.

Parent Name: _____ Signature: _____ Date: _____

I _____ **(print student name)** agree to abide by all TYSA rules and to cooperate with adults at all times. I agree not to use or possess tobacco, alcoholic beverages, controlled substances, unauthorized drugs, or to go out-of-bounds without permission.

Student Name: _____ Signature: _____ Date: _____

Bring this form and your \$60 audition fee (cash or check payable to TYSA) with you to your audition.



Student Name: _____

TUITION PAYMENT OPTION FORM FOR 2020-2021

Please check mark one of the following options and bring this form with you to the TYSA audition along with the *Consent and Agreement Form*.

There is an Early Bird Discount of \$50 when payment is received in full by September 26, 2020. The initial payment is still due on September 1, 2020. Tuition is as follows:

TYS:	\$1200 (\$1150 Early Bird discount) \$330 initial payment due by September 1, 2020
TYAO:	\$1175 (\$1125 Early Bird discount) \$305 initial payment due by September 1, 2020
TJYS:	\$1150 (\$1100 Early Bird discount) \$280 initial payment due by September 1, 2020
TSP:	\$1085 (\$1035 Early Bird discount) \$215 initial payment due by September 1, 2020
TSS:	\$1050 (\$1000 Early Bird discount) \$180 initial payment due by September 1, 2020

Option #1: 1 or 2 payments

First payment (\$330/\$305/\$280/\$215/\$180 depending on orchestra) due by September 1, 2020. Pay balance in full by September 26, 2020 to receive \$50 Early Bird Discount. _____ (parent's initials)

Option #2: 7 Payments—Debit or Credit Card

First payment (\$330/\$305/\$280/\$215/\$180 depending on orchestra) due by September 1, 2020, then 6 payments of \$145 due on October 1, November 1, December 1, January 1, February 1, March 1. Payments will be charged to my credit card below on the 1st of each month. _____ (parent's initials)
Please complete the form below.

Option #3: 7 Payments—Check or Money Order

First payment (\$330/\$305/\$280/\$215/\$180 depending on orchestra) due by September 1, 2020, then 6 payments of \$145 due on October 1, November 1, December 1, January 1, February 1, March 1. Checks will be mailed by the 1st of each month. _____ (parent's initials)

If you choose option #2, you **must** fill out the credit card or debit card information below and payments will be charged against your account on the 1st of each month October 2020 through March 2021.

Visa/MasterCard/Discover # _____

Expiration Date: _____ 3-digit Code on the Back: _____

Name on Card: _____

E-mail where receipts will be sent: _____

Signature of card holder: _____