



Policies and Release of Liability

MONTHLY TUITION

1 Class: \$95 ____

2 Classes: \$185 ____

3 Classes: \$275 ____

4 Classes: \$365 ____

UNLIMITED: \$400 ____

DISCOUNT? _____

POLICIES

Please initial below:

TUITION must be paid on the first of every month via VENMO, cash, or check only. _____

SUSPENDING ENROLLMENT Contact the front desk a minimum of FIVE DAYS prior to the 1st of the month. Students are only allowed 2 months of suspended time per year. _____

CANCELLATION & REFUNDS Cancellation requests must be made a minimum of FIVE DAYS prior to the 1st of the month. All unredeemed makeup classes are forfeited upon cancellation.

Retroactive cancellations and/or refunds are not allowed. _____

CLASS RULES Dancers must be in dress code, arrive in a timely manner (NO LATER THAN 10 MINUTES AFTER THE START OF CLASS) _____

MAKE-UP POLICY You may make up a missed class by attending a comparable, age-appropriate class at any time during your active enrollment in the school. Please pre-schedule a make-up class by contacting the front desk. _____

RELEASE OF LIABILITY

In the event of an accident, injury, or illness of the participant, consent is hereby given to any x-ray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital care which is deemed advisable by and is to be rendered under the general supervision of any physician and surgeon licensed under the provisions of the medicine practice act of the medical staff or employed by the director of the emergency department of the hospital. I release the San Pedro City Ballet and the San Pedro Ballet School and its elected representatives of employees from any and all claims, demands, liability, or loss which may arise as a result of participation in the selected activity. I absolve and hold harmless the San Pedro City Ballet and the San Pedro Ballet School and its employees and contract instructors, and designated volunteers from any liability, which may result from my participation or that from any minor in my legal custody, in the selected activity. If the participant is a minor, I also give my permission form his/her participation at the San Pedro City Ballet and San Pedro Ballet School and for any necessary medical treatment. I voluntarily seek services provided by **San Pedro Ballet School** and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures, which are subject to change, to reduce the spread while attending classes.

I have read and understand the above:

Parent/Guardian

Date