

Music Studio Policy Agreement

Wendy Waller Voice Studio Mailing Address:

526 7th Ave

Menlo Park, CA 94025

www.wendywaller.com

650-216-9138

Policy agreement (to be initialed and signed in the presence of Wendy Waller)

Communication:

I understand that all schedule changes, cancellations, or terminations must be e-mailed (no texting). Initial: _____

Tuition Policy:

I understand that tuition is due by the 25th of each month. Initial: _____

I understand that failure to pay tuition by the 28th of each month will result in a \$25 late fee. Initial: _____

I understand that payment must be made in advance to ensure my spot on Wendy's schedule. Initial: _____

I understand that schedule changes must be made at the time of my monthly tuition payment. Initial: _____

Tardiness:

I understand that there is no make-up of time due to my tardiness. (Please plan to arrive early.) Initial: _____

I understand that lesson minutes lost on account of Wendy Waller will be documented and made up by Wendy. Initial: _____

I understand that lessons will begin on time and end 3 minutes prior to the end time of the lesson. Initial: _____

Extended Leave, Vacation, or Termination of Lessons:

I understand that I must notify Wendy Waller via e-mail (only) if I am taking an extended leave, going on vacation, or terminating my lessons. Notification must happen no later than the 15th of the month prior to the month in which the action takes place. Initial: _____

I understand that failing to notify Wendy Waller by the 15th of the month regarding the aforementioned circumstances will result in a non-refundable payment of the following month's tuition. Initial: _____

Sickness:

I understand that I cannot come to my lesson sick. Initial: _____

I understand that I cannot bring sick children or adults into Wendy Waller's home waiting area. Initial: _____

I understand that if I am well enough to sing, even if sick, Wendy will give me a lesson via Skype, FaceTime, or Zoom at the regular lesson time.

Initial: _____

I understand that if I am too sick to sing, I can schedule a make-up lesson without 24 hours' notice. Initial: _____

I understand that I have a total of six (6) make-up lessons allowed per calendar year.

Initial: _____

I understand that make-ups must be completed within the month that my absence occurs. Initial: _____

I understand that if I am sick the last week of the month I must complete the make up the following week (which means I must take two (2) lessons within one week).

Initial: _____

Refunds Policy:

I understand that there will be no refund for lessons missed without notice.

Initial: _____

I understand that Wendy Waller does not roll payments over into the next month's tuition. Initial: _____

I understand that if Wendy Waller misses a lesson she will give me the option of a credit toward the following month, or a refund. Initial: _____

I understand that if I do not show for a lesson and make no other arrangements, there will be no make-up lesson and no refund. Initial: _____

I understand that Wendy Waller reserves the right to refuse and/or discontinue lessons with any student for any reason at her own discretion.

Initial: _____

By this signature, I agree to the terms and conditions of this policy.

Signature: _____ Date: _____

Signature of Parent/Guardian: _____