

# PIANO STUDIO POLICY

# LOVE FOR MUSIC PIANO STUDIO LLC

1863 W. Homestead Dr., Chandler AZ, 85286 480-202-3514 teacher@lubov4music.com www.Lubov4Music.com

#### LESSONS PER QUARTER:

Each quarter is 13 weeks in length. The tuition includes 13 private lessons

**TUITION:** Make checks payable to: **Love for Music Piano Studio LLC** There are two payment options available to all students, defined below.

- Full Quarter tuition paid in advance at the first lesson of each quarter.
- The monthly payment plan is based on 13 week tuition. 13th lesson is free.
- Monthly Payments are due by the first lesson of each month.
- Students on the monthly plan continue automatically unless cancelled.

### PRIVATE STUDENTS IN STUDIO (per student) QUARTERLY RATES

30 minute lesson = \$45	45 minute lesson = \$60	60  minute lesson = 80
\$ 540.00	\$ 720.00	\$ 960.00
1 free lesson	1 free lesson	1 free lesson

#### Monthly Payments (2022)

Student's schedules may vary from 4 to 5 week months and will be invoiced accordingly.

**EASY Payments Available**: Invoices will be sent to the parent's email listed on this application. Preferred method of payment is through Zelle, a free service available through most banks.

**REGISTRATION FEE:** Once a year fee due by October 1. It is: \$25.00 per student or \$45.00 per family (2 or more) This fee covers the cost of recitals, programs, lesson materials, lending library (borrowed music) and incentives. This fee is non-refundable regardless if the student completes the full year of lessons.

**MUSIC & STUDY REQUIREMENTS:** Students are responsible for the cost of new materials. Prompt payment (next lesson) is appreciated. *A notebook is recommended for tracking lesson and practice requirements*.

**ARIZONA STUDY PROGRAM/PIANO ENSEMBLE/FALL FESTIVAL/ELDER COMPETITION:** These programs are provided by the Phoenix Music Teachers Association and are recommended. Fees for the ABOVE are required before the event and are non-refundable.

**MISSED LESSONS**: Make-up lessons are provided only in the case of **24-hour in advance notice** of the student's illness (**not** other family members); severe weather, or teacher absence.

**SUMMER LESSONS**: A MINIMUM of 3 private lessons over the course of the summer (June/July) is required to remain in the studio program.

**RECITALS:** Participation in two recitals during the year is required. They occur in May and December.

**REFUNDS**: There are no refunds of tuition except in the case of extreme illness or family emergency. The lesson time is reserved for the semester. If a student who is on the monthly plan decides to discontinue at any time during the semester, the balance of the full semester tuition is due at the last lesson.

**LATE PAYMENTS: LATE FEES**: A \$50.00 fee will be added for payments more than 30 days overdue. Payment is due by the FIRST lesson of the month/semester.

**PRACTICE REQUIREMENTS:** Individual progress and time requirements as prescribed. Failure to practice on a regular basis will result in dismissal.

**RECITALS**: There are two studio recitals per year. All students performing are expected to stay for the ENTIRE recital. Listening to their piers is as much a part of the experience as the student's personal performance. If a student cannot stay to the end of the recital then they will not be included in the recital.

**CANCELLATION:** Parents can cancel at any time with 30-day written notice and remaining time (after 30-days) is available as a refund. Teacher may cancel at any time with refund of remaining time.

### ACCEPTANCE OF LOVE FOR MUSIC PIANO STUDIO LLC POLICY CONTRACT:

After reading this policy sheet PLEASE SIGN on the line below, and return with deposit to: Love for Music Piano Studio - 1863 W. Homestead Dr., Chandler AZ 85286 A copy will be provided, sent to your email address.

Student's Name(s)		Grade	School	Birthday
Check I HAVE INCl	UDED THE ONE TIME (\$25 per single student		,	
Check PAYMENT PLAN:_	FULL QUART	ER TUITION	l orMO	NTHLY PAYMENT PLAN.
Method of Payment:	Cash	Chee	ck Zelle (	preferred)
Parent's name (please p	rint)			
Parent's signature				
Address	City		Zip	
Phone (home)	Phone (work) or cell	 E	-mail	

## I UNDERSTAND THE PIANO STUDIO POLICY AND WISH TO ENROLL THE STUDENT(S) LISTED ABOVE.

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Signature