

Contract for Private Music Instruction

I wish to enroll _____ (student's name) in Private _____ (name of instrument or voice) Lessons but will only be effective when signed by Oldfields below. The student will receive **8** lessons, **40 or 60** minutes long for each stated trimester at a time that is mutually agreed upon between the student and the private instructor.

I wish to enroll _____ in private music lessons for the following trimester(s):

Check One:	<u>40 MINUTES</u>	<u>60 MINUTES</u>
All three seasons	<input type="checkbox"/> \$1,100.00	<input type="checkbox"/> \$1,700.00
Fall season	<input type="checkbox"/> \$ 400.00	<input type="checkbox"/> \$ 600.00
Winter season	<input type="checkbox"/> \$ 400.00	<input type="checkbox"/> \$ 600.00
Spring season	<input type="checkbox"/> \$ 400.00	<input type="checkbox"/> \$ 600.00

I understand that the above fee(s) will be deducted from the Student's debit account at the time this contract is signed by me and received by the School. I also understand that it is my responsibility to ensure an adequate account balance remains in my daughter's debit account. In the event her debit account does not have sufficient funds, I do understand my daughter will be denied any opportunity to participate in School programs and/or activities that have associated costs, until such time that her account is replenished.

I agree to accept the following terms and conditions of this contract:

1. Parents/Guardians who withdraw a student for any reason and parents/guardians of students who are absent from the lessons or who are dismissed from School for any reason are not entitled to any refund of the fee, either in total or partial inasmuch as the absence of a student does not materially decrease the expenses of the School and services contracted for well in advance.
2. In committing to a trimester session, it is expected that the student attends all weekly sessions. Should an illness or other major conflict arise, the student must give her instructor 24 hours notice. If the student cancels due to illness, she should accompany the cancellation with a note from the school nurse. In order to ensure that cancellations are communicated properly, **students should inform the Performing Arts Department Chair of their cancellations as well as the instructor.** If for any reason the instructor is unable to attend a lesson, he/she will contact the student. Provided proper notification is given via e-mail, phone call, or in person, the lesson will be made up at the end of the trimester.
3. The School cannot and does not assume responsibility for damage to or loss of a student's personal property.
4. This contract must be executed and returned to the School no later **than the first day of the new trimester.** Otherwise, the contract is considered withdrawn.
5. The School reserves the right unilaterally to cancel the Private Music Lesson Program for any reason including inadequate staffing, insufficient student participation, and including the safety and welfare of the students. In the event of such cancellation, the School will refund the quarterly fee.

Date: _____

Signed: _____

Parents (if living), Guardian or Trustee

Accepted for Oldfields School, Inc.

Date: _____

Signed: _____

Please sign and return this contract to:

Director of Performing Arts
Oldfields School, Inc.
1500 Glencoe Road, Glencoe, MD 21152