



Darlington School

Arts Academy - Lessons Program

Student's Name: _____ Grade: _____

Preferred Contact Name: _____ Email: _____

Home Phone: _____ Mobile Phone: _____

Mailing Address: _____

School: (Non-Darlington Student) _____

Adult: Darlington Parent or Staff Non-Darlington Parent

Piano Instrument: _____ Voice Visual Art

ATTENDANCE POLICY

- Absences due to illness: The instructor must have notification by 7 a.m. the day of the lesson in order for the lesson to be excused
- Absences due to other conflicts: The instructor must have notification at least 24 hours in advance in order for the lesson to be excused.
- Lesson rollover from semester to semester is allowed, though all lessons must be completed by the end of May. Should a student have excessive rollover due to a high number of "excused" absences, those lessons will be forfeited and no reimbursement will be made.
- Missed lessons due to instructor absences will be made up by arrangement between student and instructor.

PAYMENT POLICY

- Payment for lessons will be made to Darlington School. Contact Will Camp about optional credit card payments.
- Students who withdraw after their third lesson are responsible for payment for the entire semester.

PAYMENT SCHEDULE- 12 LESSONS PER SEMESTER

30-minute lesson: \$360 45-minute lesson: \$510 60-minute lesson: \$660

Art: \$150 (6) lessons

LESSONS POLICY

- Developing a direct line of communication between parent and instructor is vital to the success of the student and the lesson programs.
- Parents, when conflicts arise you should contact the instructor immediately. The individual instructor's studio ultimately handles the attendance policy, so developing a positive and direct relationship with the teacher will benefit the parent, instructor and student.
- This contract serves as a one-time registration for the entire year and serves as an agreement between parent/student and instructor on a semester-by-semester basis.

As parent or guardian of the student listed above, I agree to the Lessons Program Policy:

CUSTODIAL PARENT OR LEGAL GUARDIAN SIGNATURE

DATE