



ACADEMY OF PERFORMING ARTS

P.O. BOX 6426, MARIETTA, GA 30065 - 678 697-4706
 WWW. MUSICONWHEELSGA.COM.

MUSIC INSTRUMENTATION

Please check box

OFFICE LESSONS

30-MINUTES WEEKLY

- PIANO \$135 MONTHLY (DIRECTOR)
- VOICE \$135 MONTHLY (DIRECTOR)
- PIANO \$100 MONTHLY (MUSIC TEACHER)
- VOICE \$100 MONTHLY (MUSIC TEACHER)
- DRUM \$100 MONTHLY
- STRINGS \$100 MONTHLY

ADDITIONAL SIBLING: 10% DISCOUNT ON INSTRUMENTAL OFFICE LESSON

HOME LESSONS

- PIANO \$195 (WITHIN 10 MI FROM ACADEMY)
- VOICE \$195 (WITHIN 10 MI FROM ACADEMY)
- ADDITIONAL SIBLING \$100

NOTE: A RECITAL FEE IS REQUIRED WITH REGISTRATION.

DANCE

Please check box

MONTHLY COST

- CREATIVE MOVEMENT \$75 (45MIN)
- CONTEMPORARY \$75 (45MIN)
- URBAN \$75 (45MIN)
- CONTEMPORARY & URBAN \$110 (45MIN)
- PRIVATE DANCE \$100 (30MIN)

NOTE: THERE MAY BE EXTRA REHEARSALS FOR PERFORMANCES/EVENTS/RECITALS.

ATTIRE FEE: THERE IS A REQUIRED COSTUME RENTAL FEE DUE WITH INITIAL REGISTRATION.

THEATER

Please check box

THEATER CLASS:
 \$100 MONTHLY

WINTER PRODUCTION ONLY:
 TUITION SCHOLARSHIP GIVEN TO SELECTED STUDENTS 1-TIME YEARLY

NOTE: THERE MAY BE EXTRA REHEARSALS FOR PERFORMANCES. SEE PARENT STUDENT HANDBOOK FOR ATTIRE AND PERFORMANCE FEES.

STUDENT APPLICATION FORM

\$30.00 REGISTRATION FEE PER APPLICANT

Student's Name:

AGE: Home Telephone: Cell Phone:

Street Address:

City, State, Zip :

Parent's Name:

Email:

PAYMENT METHOD

QUARTERLY TUITION PER STUDENT: FOUR TUITION PAYMENTS ARE REQUIRED DURING THE YEAR REFLECTING 3 MONTHS. PAYMENTS CAN BE MADE BY CASH, CHECK, CREDIT CARD, MONEY ORDER, OR ONLINE. REGISTRATION & RECITAL FEES ARE REQUIRED WITH THE FIRST PAYMENT.

INSTRUMENTAL LESSONS: FIRST PAYMENT INCLUDES QUARTERLY TUITION, REGISTRATION FEE, AND RECITAL FEE. DOES NOT INCLUDE BOOK FEES AND/OR INSTRUMENT RENTAL FEES. SEE TEACHER FOR DETAILS.

DANCE STUDENTS: FIRST PAYMENT INCLUDES QUARTERLY TUITION, REGISTRATION FEE, RECITAL FEE, & COSTUME RENTAL FEE.

THERE ARE NO REFUNDS. ALL FEES PAID ARE NON-REFUNDABLE. **INITIAL:** _____

AUTOMATIC DEBIT PER STUDENT: YOUR ACCOUNT WILL BE DEBITED ON THE 1ST OF EACH MONTH.

INSTRUMENTAL STUDENTS: MUSIC BOOKS ARE REQUIRED. FIRST PAYMENT INCLUDES TUITION, REGISTRATION FEE, AND RECITAL FEE. DOES NOT INCLUDE BOOK FEES AND/OR INSTRUMENT RENTAL FEES. SEE TEACHER FOR DETAILS.

DANCE STUDENTS: FIRST PAYMENT INCLUDES TUITION, REGISTRATION FEE, RECITAL FEE, & COSTUME RENTAL FEE.

THERE ARE NO REFUNDS. ALL FEES PAID ARE NON-REFUNDABLE. **INITIAL:** _____

CREDIT CARD NO.(VISA/MASTERCARD) _____

EXPIRATION _____ CSC(3-DIGIT #) _____

BILLING ADDRESS: _____

I AUTHORIZE MUSIC ON WHEELS, LLC TO DEBIT MY ACCOUNT MONTHLY FOR TUITION. I UNDERSTAND THERE ARE NO REFUNDS. LESSONS ARE RECURRENT. IF I DECIDE TO CANCEL SERVICES, I UNDERSTAND THAT I MUST SUBMIT A WRITTEN 30 DAY NOTICE IN ADVANCE TO STOP DEBIT PAYMENTS, OR BE CHARGED A \$35 CANCELLATION FEE.

SIGNATURE: _____

ACCIDENT WAIVER AND RELEASE OF LIABILITY

I WAIVE, RELEASE AND DISCHARGE FROM ANY AND ALL LIABILITY, INCLUDING BUT NOT LIMITED TO LIABILITY ARISING FROM THE NEGLIGENCE OR FAULT OF THE ENTITIES OR PERSONS RELEASED: MUSIC ON WHEELS, AND /OR THEIR DIRECTORS, OFFICERS, EMPLOYEES, VOLUNTEERS, REPRESENTATIVES, AND AGENTS, THE ACTIVITY OR EVENTHOLDERS, SPONSORS, OR VOLUNTEERS. I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE THE ENTITIES MENTIONED IN THIS PARAGRAPH FROM ALL LIABILITIES AND CLAIMS RESULTING FROM PARTICIPATION IN CLASSES, LESSONS, EVENTS, OR ACTIVITIES DUE TO NEGLIGENCE, ERRORS, OMISSIONS, ACTS, OR FAILURES TO ACT OF ANY PARTY OR ENTITY CONDUCTING SERVICES, ACTIVITIES, OR EVENTS ON BEHALF OF MUSIC ON WHEELS.

I ACKNOWLEDGE THAT THIS ACTIVITY OR EVENT MAY INVOLVE A TEST OF A PERSON'S PHYSICAL AND MENTAL LIMITS AND MAY CARRY WITH IT THE POTENTIAL FOR SERIOUS INJURY, PROPERTY LOSS, OR DEATH. RISKS MAY INCLUDE, BUT ARE NOT LIMITED TO, THOSE CAUSED BY TERRAIN, FACILITIES, TEMPERATURE, WEATHER, HEALTH CONDITION OF PARTICIPANTS, EQUIPMENT, VEHICULAR TRAFFIC, ACTIONS OF OTHER PEOPLE INCLUDING, BUT NOT LIMITED TO, PARTICIPANTS, VOLUNTEERS, SPECTATORS, COACHES, EVENT OFFICIALS, AND EVENT MONITORS, AND/OR PRODUCERS OF THE EVENT, AND LACK OF HYDRATION. THESE RISKS ARE NOT ONLY INHERENT TO PARTICIPANTS, BUT ARE ALSO PRESENT FOR STAFF.

I UNDERSTAND THAT RISK OF INJURY IS INHERENT IN ANY PHYSICAL ACTIVITY, AND I, ON BEHALF OF MYSELF/MY CHILD, KNOWINGLY AND VOLUNTARILY ACCEPT THAT RISK THAT MAY INCLUDE BUT IS NOT LIMITED TO HEART, BACK, MEDICAL, ALLERGY, MUSCULAR, PREGNANCY, DIABETES, EPILEPSY, CHEMICAL OR NEUROLOGICAL CONDITION, SPECIAL MEDICATION, KNEE/KIDNEY/SHOULDER PROBLEMS, ETC. I FURTHER CERTIFY THAT THE AFOREMENTIONED STUDENT IS IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN THE EXERCISE/DANCE PROGRAM AND THAT HE/SHE HAS BEEN EXAMINED BY A LICENSED PHYSICIAN AND FOUND TO BE IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN THE MUSIC ON WHEELS PROGRAM.

I HEREBY CONSENT MY CHILD TO RECEIVE MEDICAL TREATMENT, WHICH MAY BE DEEMED ADVISABLE IN THE EVENT OF INJURY, ACCIDENT, AND/OR ILLNESS DURING THIS CLASS, ACTIVITY OR EVENT. I UNDERSTAND THAT I AM RESPONSIBLE FOR ANY MEDICAL EXPENSES AND THAT THE ABSENCE OF HEALTH INSURANCE DOES NOT MAKE MUSIC ON WHEELS, LLC RESPONSIBLE FOR PAYMENT OF MEDICAL EXPENSES.

THE ACCIDENT WAIVER AND RELEASE OF LIABILITY SHALL BE CONSTRUED BROADLY TO PROVIDE A RELEASE AND WAIVER TO THE MAXIMUM EXTENT PERMISSIBLE UNDER APPLICABLE LAW.

I ALSO UNDERSTAND THAT AT THIS EVENT OR RELATED ACTIVITIES, MY CHILD MAY BE PHOTOGRAPHED OR VIDEOTAPED IN ACTIVITIES DESCRIBED WITHIN MUSIC ON WHEELS' PROGRAM. I AGREE TO ALLOW PHOTOS, VIDEO, INTERNET ADVERTISEMENT, AND/OR FILM TO BE USED FOR ANY LEGITIMATE PURPOSE BY THE EVENT HOLDERS, PRODUCERS, SPONSORS, ORGANIZERS, FOR MARKETING, INFORMATIONAL, OR EDUCATIONAL PURPOSES.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY AGREE AND UNDERSTAND ITS CONTENT. I HAVE ALSO RECEIVED THE PARENT/STUDENT ENROLLMENT HANDBOOK AND I UNDERSTAND THAT I AM RESPONSIBLE AND ACCOUNTABLE TO THE INFORMATION ENCLOSED. I GIVE MY CHILD PERMISSION TO PARTICIPATE IN THE MUSIC ON WHEELS PROGRAM UNDER THE GUIDELINES SET FORTH IN THE PARENT/STUDENT ENROLLMENT MANUEL, AND THIS ENTIRE FORM REGARDING PAYMENT, LIABILITY WAIVER, AND RELEASE OF PHOTOGRAPHY AND VIDEO.

STUDENT NAME: _____

PARENT NAME: _____ DATE: _____

SIGNATURE: _____