

EPIC Dance Center

PAYMENT POLICY

THE DANCE PROGRAM RUNS FROM SEPTEMBER TO JUNE. THIS IS SEASON TUITION AND MAY BE PAID IN FULL OR YOU MAY FOLLOW OUR 10 MONTHLY INSTALLMENT PROGRAM, **AUGUST THROUGH MAY**.

PAYMENTS ARE DISCOUNTED WHEN PAID BY THE 7TH OF EACH MONTH.

I UNDERSTAND THE OBLIGATION TO PAY ALL FEES DESCRIBED IN THE POLICY IS UNCONDITIONAL. NO PORTION OF THIS FEE PAID OR OUTSTANDING IS REFUNDED IN THE EVENT OF ABSENCE, WITHDRAWAL, PANDEMIC OR DISMISSAL OF A STUDENT FROM THE SCHOOL.

I AGREE TO PAY ALL INCIDENTAL EXPENSES AS INCURRED BY THIS STUDENT WHICH INCLUDE, BUT NOT LIMITED TO, COSTUMES, DANCEWEAR, TICKETS, OPTIONAL TRIPS, AND SPECIAL EVENTS, ETC. PLEASE NOTE THAT LATE PAYMENT OF TUITION FEE AND OTHER EXPENSES IS SUBJECT TO A FINANCE CHARGE. I FURTHER AGREE TO PAY ANY REASONABLE COSTS INCLUDING ATTORNEY FEES ASSOCIATED WITH THE SCHOOL'S EFFORT TO COLLECT FUNDS DUE TO IT UNDER THE TERMS OF THIS CONTRACT.

ANY PAYMENT RECEIVED WILL BE APPLIED TO OUTSTANDING BALANCES FIRST.

ACCOUNTS THAT ARE MORE THAN 30 DAYS PAST DUE WILL RESULT IN THE LOSS OF PRIVILEGE TO PARTICIPATE IN CLASS UNTIL THE ACCOUNT IS BROUGHT CURRENT.

ANY PAYMENT OVERDUE 60 DAYS, WILL INCUR A \$5.00 LATE CHARGE. THIS CHARGE WILL CONTINUE EVERY 30 DAYS UNTIL ACCOUNT IS BROUGHT CURRENT.

EPIC DANCE CENTER MUST BE NOTIFIED IN WRITING BY NOVEMBER 30TH IF A DANCER DOES NOT PLAN ON FINISHING THE DANCE SEASON. AFTER THIS DATE, YOU WILL BE CONSIDERED LIABLE FOR THE REMAINDER OF THE DANCE SEASON TUITION REGARDLESS OF ATTENDANCE.

ALL ACCOUNTS MUST BE PAID IN FULL NO LATER THAN MAY 31ST. THIS INCLUDES ANY FEES INCURRED THROUGHOUT THE DANCE SEASON SUCH AS RECITAL FEE AND COSTUME DEPOSITS/BALANCES.

COSTUME DEPOSITS/RECITAL FEE

THERE IS A COSTUME DEPOSIT OF **\$65.00** PER STUDENT PER **PRESCHOOL CLASS** AND **\$80.00** DEPOSIT PER STUDENT PER CLASS FOR ALL OTHERS **DUE NO LATER THAN NOVEMBER 15TH**.

ANY DEPOSIT NOT RECEIVED BY NOVEMBER 15TH WILL RECEIVE A \$5.00 SERVICE CHARGE PER COSTUME. **NO EXCEPTIONS!**

NO COSTUME WILL BE ORDERED UNTIL PAYMENT IS MADE IN FULL. COSTUMES THAT EXCEED THE DEPOSIT WILL HAVE A BALANCE DUE AS SOON AS COSTUME PRICE IS DETERMINED. UNTIL ALL BALANCES ARE PAID IN FULL, STUDENTS WILL NOT RECEIVE COSTUMES. **ALL COSTUME DEPOSITS ARE NON-REFUNDABLE.**

THERE IS A **\$30.00** PER STUDENT OR **\$55.00** PER FAMILY REHEARSAL FEE DUE BY MARCH 7TH. A SERVICE CHARGE OF \$5.00 WILL BE APPLIED IF PAID AFTER MARCH 7TH.

COVID WAIVER

We have a plan in place if we are subject to a stay in place order. We will continue your dance training from home via ZOOM. Links will be provided through email. Installments will continue to be made to the studio by mailed check or VENMO.

If you choose to not participate through ZOOM and not continue to make your installments, your classroom (in person training) registered spot will be forfeited and given to someone else on our waiting list when we are able to return/reopen and the stay in place order is lifted.

By signing this consent and release in the space provided below, you hereby release, acquit, waive, all claims against, and forever discharge the EPIC Dance Center Inc. providing my dance education and its owners, successors, assigns, affiliates, officers, directors, administrators, representatives, principals, agents, independent contractors, insurers, and attorneys, of and from any and all claims, charges, demands, promises, acts, agreements, costs, damages, debts, obligations, actions, causes of action, suits in equity, expenses, executions, judgements, levies, liabilities, losses, and attorney fees, of whatever kind of nature, whether legal or equitable, liquidated or unliquidated, fixed or contingent, direct or indirect, suspected or unsuspected, accrued or unaccrued, known or unknown, present or future, asserted or unasserted, based upon, arising out of, appertaining to, or in connection with your exposure to the Severe Acute Respiratory Syndrome Coronavirus 2 or contracting coronavirus disease (CO-VID 19) as a result of or in connection with your entry into the dance center, and all related costs, expenses, illness, or death you may suffer as a result.

You agree that you have voluntarily signed and that you have read and understand the Payment Policy and Covid Waiver.

SIGNATURE _____

DATE _____