

2300 E Lincoln
 Wichita, KS 67211
 (316) 262-1487 or 800-362-1060
 education@senseneymusic.com



Business Hours:	
Mon – Thu	9:30am - 6:30pm
Fri – Sat	9:30am - 5:30pm

Lessons and Tuition Agreement

- Registration Fees**

A \$25.00 **annual** registration fee is charged for each family. This non-refundable fee is payable prior to the first session.

- Tuition Fees 30 Minute Weekly Lesson (Paid monthly in advance)**

\$89.00 Per Month-Individual Lessons (Save \$3.00 per month with our Easy Pay Plan & Automatic Payments)

- Payment**

Registration and Tuition fees are to be paid before the first lesson is given. Statements will be issued to all students on the 15th of each succeeding month and will be due before the 1st lesson of the month. All open accounts are due in full upon receipt of a monthly statement. All invoices over 35 days are subject to an annual finance charge of 18% (1.5% monthly).

If you have any questions about your account please call the Music Education Department

- Absence Policy**

Tuition is paid to reserve a guaranteed space and teacher for a specific time each week. Therefore, each lesson time must be paid regardless of the attendance of the student. The teacher's time and space will be reserved and therefore charged until the department coordinator receives a **two week written notice of withdrawal from lessons**. A lesson credit will be given if a qualified substitute is unavailable in case of teacher illness.

I have read and agree to the above policies. (Please sign below)

Name _____	Date _____	Acct# _____
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BILLING INFORMATION

Customer Name _____
 Street Address _____
 City _____ State _____
 Zip _____ Cell Phone # (____) _____
 Home Phone # (____) _____
 E-Mail _____
 Lesson Time Preferred: _____
 Start Date Preferred: _____

STUDENT INFORMATION

Student Name _____
 School Name _____
 Date of Birth _____
 Instrument / Voice _____
 How long have you played? _____
 Authorization for Senseneymusic Easy Pay Plan (\$86 / month)
 Yes _____ No _____

Additional Information:

<i>Office Use Only</i>											
TEACHER NAME: _____	OFFICE: _____	Rate _____	Auto Pay Type _____								
REGISTRATION FEE: _____	RECEIVED BY: _____	<table style="margin: auto;"> <tr> <td>__T</td><td>__E</td><td>__LC</td><td>__AF</td> </tr> <tr> <td>__N</td><td>__CH</td><td>__SK</td><td>__ML</td> </tr> </table>		__T	__E	__LC	__AF	__N	__CH	__SK	__ML
__T	__E			__LC	__AF						
__N	__CH			__SK	__ML						
TUITION FEE: _____	DATE: _____										
TOTAL: _____	_____										