



978-568-0627  
57 Hunter Avenue  
Hudson, MA 01749

Scheduling: 978-212-2867

www.edmascari.com  
scheduling@edmascari.com

## Parent or Adult Student Agreement: Standard Program 2011-2012 Natick Studio

Fees: For thirty-minute piano lessons at the Ed Mascari Piano Studio, Inc.

**\$185 per month** with Mr. Mascari or **\$165 per month** with other Natick Faculty members.

I, \_\_\_\_\_ (Print name), agree to employ the **Ed Mascari Piano Studio, Inc.** at the fee indicated above for the purpose of piano instruction, and I further agree to the following:

I have read, understand and agree to the policies as identified in the “**Standard Program Policy**”.

I understand that the tuition fee is based on a total of **34** lessons (with 2, 3, 4 or 5 lessons per month) taking place over a period of 10 months from September through June and is NOT a per lesson amount.

I understand that the **tuition fee is due on or before the 1st of every month**. I further understand that I will be charged a fee of **\$10.00** if my payment is **7 days late** and **\$25** if my payment is **14 days late**.

I agree to continue to pay this **monthly tuition fee on or before the 1<sup>st</sup> of every month** for a period of 10 months unless I provide a **minimum of one month’s advance notice prior to withdrawal** from the lesson program (temporarily or permanently) for any reason. Please notify the Studio Scheduling Manager at: [scheduling@edmascari.com](mailto:scheduling@edmascari.com)

I understand that there is **no financial credit given** for lessons missed for any reason.

I understand that a **maximum of three (3) lessons** per year (including those missed due to snow or storm closings) may be made up during the **MAKE-UP WEEKS** according to the criteria outlined in the “**Standard Program Policy**”.

I understand that the purpose of the lessons is to provide assistance and guidance in goals related to musical development and growth with particular focus on playing the piano.

Date of Agreement: \_\_\_\_\_

Student / Parent Signature: \_\_\_\_\_

Student / Parent name (printed): \_\_\_\_\_

Student name (printed) if a minor \_\_\_\_\_

Please sign, date and mail this contract **prior to September 1, 2011** or prior to your first lesson to:  
**Ed Mascari Piano Studio, Inc. 57 Hunter Ave, Hudson, MA 01749-3043**