



S.T.A.R.S. – Soo Theatre Arts Resource Studio
Fall 2020 – Spring 2021 Registration
32 Weeks*



Parent/Guardian OR Adult Student Contact Information: Must be filled out completely

Parent Name _____ Home Phone _____ Cell _____

Email Address _____

Mailing Address _____ City _____ Zip _____

Person responsible for payment of fees _____ City of SSM Resident: Y N
(if different than above)

Address _____ City _____ Zip _____
(if different from above)

Alternate Contact _____ Phone _____ Relationship _____
(in case of emergency and parent contact is not available)

Remarks/Special Needs or Medical Conditions that we should be aware of _____

The following questions are not required but are helpful in applying for and obtaining grants that keep our tuition affordable.

Does your family live in Sault Saint Marie north of 3 Mile Road? Yes No

Are you tribal members? Yes No

Tuition Information

A \$25 administration fee per family per year (Sept – Aug) is required at the time of registration. This fee is a bookkeeping and administrative fee that is not applied to tuition and is non-refundable. It saves your preferred lesson day and time with your instructor and helps us to plan for new students. Tuition is based on a 32-week schedule for most instructors. Tuition can be

- 1) paid in full before the start of your lessons, or
- 2) be divided into thirds with payments being made by the following dates for the 2020-2021 school year:

9/14/20 11/9/20 2/15/21

You will be emailed a week prior to each due date as a reminder to stop in the office and make your payment.

You may start lessons at any time during the year, per instructor availability. If you start after the 32-week session has begun, your bill will be pro-rated to reflect the number of weeks left in the 32-week schedule.

Please indicate by checking below how you would like to make your tuition payments:

- _____ I will mail a check (534 Ashmun St)
- _____ I will drop off a check to the Soo Theatre mailbox
- _____ I would like someone to call me to process tuition payments over the phone with a debit/credit card

PRIVATE LESSONS (Fill out this box if you are signing up for private lessons)

1st Student Full Name: _____ (Circle One) New Student Returning Student

If the student is under 18 years of age Age _____ Birthdate _____ Gender M F

Circle one: piano voice harp flute clarinet
 violin viola cello bass other: _____

Lesson Length: 30 min 40min 55 min

Instructor Requested: _____ Days/Times Available: _____
(Please list several days and times)

***Additional students for private lessons may be listed on reverse side of registration.**

Parent/Adult Student Signature _____ Date _____

Your signature indicates that you are responsible for the tuition payable as outlined in this registration. A completed policies sheet must also be signed and on file for each family/student.

Additional Private Lessons (fill out if more than one student)

2nd Student Full Name: _____ (Circle One) New Student Returning Student

If the student is under 18 years of age Age _____ Birthdate _____ Gender M F

Circle one: piano voice harp flute clarinet

Violin viola cello bass other: _____

Lesson Length: 30 min 40min 55 min

Instructor: _____ Days/Times Available: _____

3rd Student Full Name: _____ (Circle One) New Student Returning Student

If the student is under 18 years of age Age _____ Birthdate _____ Gender M F

Circle one: piano voice harp flute clarinet

Violin viola cello bass other: _____

Lesson Length: 30 min 40min 55 min

Instructor: _____ Days/Times Available: _____

GROUP CLASSES (Fill out this box if you are signing up for a group class)

Student Name _____	Name of class _____
Student Name _____	Name of class _____
Student Name _____	Name of class _____
Student Name _____	Name of class _____
Student Name _____	Name of class _____

Office Use

_____ \$25 Registration/ Administration Fee Paid	_____ Additional Payment Made
_____ Credit Card	
_____ Check #	
_____ Cash (Receipt)	

Summer 2021

_____ All information on the front of this registration is correct. (Please initial)

_____ Punch Card Purchased (circle one) 4 lessons 6 lessons 8 lessons

Student Name: _____ Teacher Name: _____ Length: _____

_____ Punch Card Purchased (circle one) 4 lessons 6 lessons 8 lessons

Student Name: _____ Teacher Name: _____ Length: _____

Student: _____	Summer Camp: _____
Student: _____	Summer Camp: _____
Student: _____	Summer Camp: _____
Student: _____	Summer Camp: _____
Student: _____	Summer Camp: _____