Classes begin, Wednesday, September 3<sup>rd</sup>, 2025. The 2025-26 season will run from September 3<sup>rd</sup> - June 13<sup>th</sup>. There is a total of 38 sessions and 9 tuition payments. Payments are due at Registration, October 1<sup>st</sup>, November 1<sup>st</sup>, December 1<sup>st</sup>, January 1<sup>st</sup>, February 1<sup>st</sup>, March 1<sup>st</sup>, April 1<sup>st</sup>, and May 1<sup>st</sup>.

Prices for the 2025-2026 school year are as follows. (Monthly tuition increases by \$5.00 after the  $8^{th}$  of the month and by \$15 after the  $20^{th}$  of the month.) There is a registration fee at time of registration depending on when you register. Please refer to registration form.

# of classes	Price per month
<b>Aerial Acrobatics</b>	\$70
Beginner Workshop	\$80
1	\$55
2	\$100
3	\$140
4	\$175
5	\$205

Acro Classes please add an additional \$3 to monthly tuition.

For 6 or more classes, add \$25 per class. The above prices are based on a PER STUDENT rate, not a per family. Schedule and prices are subject to change. Our preferred method of payment options are by check or through Venmo:

KristenWay-JGDA.

## **Tuition Policy:**

- 1. Tuition is due on the  $1^{st}$  of the month. Tuition increases by \$5.00 after the  $8^{th}$  of the month and by \$15 after the  $20^{th}$  of the month.
- 2. There will be a \$25 charge (subject to change according to bank policies) on any returned check and a cash payment will be required thereafter.
- 3. There is a 3.5% surcharge for every \$100 when using a credit card for payment.
- 4. Tuition is non-refundable. You may take make-up classes for any that are missed.
- 5. The payment made when you registered is credited towards Sept/June and is *non-refundable*.
- 6. The above tuition list is applied to each individual and not a family rate. For example, if two siblings each take 3 classes a week, each child receives his/her own discount. In such case, each would pay \$140.
- 7. If you need to make special arrangements for tuition payments, please contact Kristen before classes began so we can discuss it with you.

## PLEASE SIGN AND COMPLETE THE FOLLOWING WHEN REGISTERING:

I, (your name)	realize my child/children will be participating in a	
physical activity, and as such, I realize there is an	element of risk involved. In the event of an accident or	
illness involving (child/children's name)	I will be notified	
immediately. My phone number is:	In the event that I cannot be	
reached, I hereby designate (name)	as the person to be contacted.	
Their phone number is:	In the event that none of the above can be	
contacted, I hereby authorize JG dance to take an	y steps it deems necessary to make medical attention	
available, including physicians, hospital, or any otl	her medical services. JG Dance shall have full discretion	
to make such a decision. In such event, I further a	agree that the cost of medical services shall be borne	
exclusively by myself (parent/legal guardian's nan	ne) and JG	
Dance will not be liable.		
	(signature)	
KNOWN ALLERGIES:		