

**SOUTHEASTERN LOUISIANA UNIVERSITY  
COMMUNITY MUSIC SCHOOL  
FALL 2019**

**INDIVIDUAL LESSONS – 13 WEEKS  
Thirteen, 30 -minute lessons**

Student Instructor	\$250
Graduate Student	\$280
Professional	\$320
CMS Director	\$340
SLU Faculty	\$400

- 45-minute lessons, and 60-minute lessons are available

*\$20 late registration fee will apply to registrations postmarked after August 26*

**ORCHESTRA (Violin, Viola, and Cello) – 5 WEEKS  
Five, 60-minute classes  
*1 year of prior experience required***

**Schedule:** TBA

Students taking individual lessons with CMS	\$40.00
Students who are only enrolled in Orchestra	\$125.00

**RECITAL PERFORMANCE:  
\$10.00 (to be paid by December 3)**

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**PRIVATE LESSON SCHEDULE**

<b>Week of:</b>	<b>Lesson #</b>
September 2	1
September 9	2
September 16	3
September 23	4
September 30	5
October 7	6
October 14	7
October 21	8
October 28	9
November 4	10
November 11	11
November 18	12
November 25	No lessons
December 2	13

**ORCHESTRA SCHEDULE**

TBA

**RECITALS**

December 10 at 6 p.m.

December 11 at 6 p.m.

December 12 at 6 p.m.

**HOLIDAYS**

September 2 – Labor day (to be made up)

October 3 & 4 – Fall Break (to be made up)

November 25 - 29 – Thanksgiving (no lessons this week)

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**REGISTRATION AND TUITION POLICY**

**REGISTRATION OPTIONS**

- Use the "FALL 2019 online registration" link on our website to submit your registration form on line
- Scroll down for a printable registration form.

Mail your completed registration form to:

Southeastern Community Music School  
SLU 10817  
Department of Music and Dramatic Arts  
Hammond, LA 70402

Or bring your form to one of the following:

Department of Fine and Performing Arts  
Main Office

Community Music School Office  
Pottle Music Building Annex  
Room A253

**Please make check payable to:**

**SOUTHEASTERN LOUISIANA UNIVERSITY**

If you have more than one family member studying at the CMS, be sure there is a registration form for EACH student. Registration forms must be filled out each semester.

**ONCE YOUR FORM HAS BEEN RECEIVED**

If you are a returning student, you will be contacted by your instructor for scheduling.

If you are a new student, you will be assigned an instructor who will contact you for scheduling a few days prior to the beginning of the semester.

**TUITION POLICY**

**There are two (2) payment options for CMS tuition.**

- 1) Full payment on or before the first lesson
- 2) Half payment due on or before the first lesson - **balance due by October 10.**  
***\$10 late fee will apply to tuition payments postmarked after October 10.***
- 3) Recital fee (if performing at the recital) – **due by December 3.**

Payments by check may be mailed to CMS 10817, Hammond, LA 70402, or delivered in person to the CMS office. If you wish to pay via credit card, you may do so by calling our office (985 549 5502).

NOTE: If you begin lessons after the first week, your tuition will be pro-rated to reflect the actual number of scheduled lessons, however a \$20 late registration fee will still apply. In addition, no refunds are given for CMS tuition, though tuition can be credited towards the following semester under certain circumstances.

**CONTACT INFORMATION**

Office location: Pottle Annex A253  
Office hours: Mon-Fri 9:00 a.m.-5:00 p.m.  
Phone: 985-549-5502  
Email: [CMS@selu.edu](mailto:CMS@selu.edu)  
CMS Director: Jivka Duke

Mail List \_\_\_\_\_ Roster \_\_\_\_\_

**COMMUNITY MUSIC SCHOOL  
FALL 2019 REGISTRATION FORM**  
(One form per student)

Student name \_\_\_\_\_ Parent name \_\_\_\_\_  
Age \_\_\_\_\_ Phone (home) \_\_\_\_\_  
School \_\_\_\_\_ Phone (work) \_\_\_\_\_  
Instrument \_\_\_\_\_ Phone (cell) \_\_\_\_\_  
Instrument \_\_\_\_\_ Email address \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Instructor (if applicable) \_\_\_\_\_ 30 min \_\_\_\_\_ 60 min \_\_\_\_\_  
Preferred Instructor (if applicable) \_\_\_\_\_ 30 min \_\_\_\_\_ 60 min \_\_\_\_\_  
**Location (please circle)**      **SLU Campus**      **NTCC Lacombe**      **Livingston**

**A minimum of 1/2 the balance due will need to be received on or before the first lesson.**  
Any remaining balance will be due **October 10.**

***\$10 late fee will apply to tuition payments postmarked after October 10***

**Recital performance (optional)      \$10 (to be paid by December 3)**

**CMS STUDENTS UNDER 18**

List all persons responsible for picking up the student after lessons.

Does the student have permission to leave the SLU Music Building? \_\_\_\_\_ For what reason(s)? \_\_\_\_\_

**Absence Policy:** I agree to give my instructor at least a 3 hour notice for a cancellation. If not, the instructor is not obligated to offer a make-up lesson. \_\_\_\_\_ (Initial)

**Payment Policy:** I understand that any debt owed to the Community Music School as a result of a failure to make required payments and/or failure to respond to demands for payment made by CMS may result in such debts being transferred to the State of Louisiana Attorney General's Office, or other outside collection agency, for collection. Upon transmittal for collection, the student/parent guardian is responsible for collection/attorney's fees in the amount of thirty-three and one-third per cent (33 1/3%) of the unpaid debt, and all court costs \_\_\_\_\_ (Initial)

**Termination Policy:** In the event of discontinuing lessons with CMS prior to the end of the semester, I agree to give the CMS office four weeks' notice, or to pay the equivalent of four lessons counted from the date of my notice. \_\_\_\_\_ (Initial)

**Photo/Video Release:** I hereby consent to the use of photographs/videos of my child/dependent/self, and/or any copies of this photograph/video in any editorial and/or promotional material produced and/or published by Southeastern Louisiana University. This includes usage in commercial advertising and the Internet. I understand that signing this release does not guarantee use of the photos/videos. \_\_\_\_\_ (Initial)

**\*\*\* Office Use Only \*\*\***

Date Received \_\_\_\_\_ Lesson/Time \_\_\_\_\_  
Misc. Discounts/Scholarships \_\_\_\_\_ Total Tuition \_\_\_\_\_  
Payment \_\_\_\_\_ Date \_\_\_\_\_ Check#/Cash \_\_\_\_\_ Balance \_\_\_\_\_  
Payment \_\_\_\_\_ Date \_\_\_\_\_ Check#/Cash \_\_\_\_\_ Balance \_\_\_\_\_