



**EMMANUEL**  
**ARTS ACADEMY**

Re-enrollment form for current students only

**INFORMATION**

Student name \_\_\_\_\_ Parent(s) Name \_\_\_\_\_

Primary e-mail for billing/contacts \_\_\_\_\_

Home phone# \_\_\_\_\_ Cell # \_\_\_\_\_

**Class Request (refer to class offerings for day/time & tuition costs)**

Class name \_\_\_\_\_ tuition fee \_\_\_\_\_

Class name \_\_\_\_\_ tuition fee \_\_\_\_\_

**Applied lesson**

Type (piano, voice, etc.) \_\_\_\_\_ Instructor (if known): \_\_\_\_\_

Length of lesson per week: \_\_\_\_\_ 30 minutes \_\_\_\_\_ 45 Minutes \_\_\_\_\_ 60 minutes

Instructor preference\*: \_\_\_\_\_ EC Student (\$12.50) \_\_\_\_\_ Affiliate (\$14-20) \_\_\_\_\_ EC Faculty (\$25-30)

Preferred day and time (1) \_\_\_\_\_ (2) \_\_\_\_\_

I agree to the Arts Academy attendance, refund and permission policies (as listed on the standard registration form)

\_\_\_\_\_  
Student or Parent/guardian (if under 18 yrs. old)

\$ \_\_\_\_\_ Total amount paid or charged

Tuition plus the yearly membership fee (\$30 individual/\$50 family if not already paid in this year).

Please note your method of payment:

\_\_\_\_\_ My check/money order is enclosed (payable to Emmanuel College)

\_\_\_\_\_ Charge my Visa: \_\_\_\_\_ MasterCard: \_\_\_\_\_ Discover: \_\_\_\_\_ American Express: \_\_\_\_\_

Name of card holder & billing address: \_\_\_\_\_

\_\_\_\_\_  
Credit card number : \_\_\_\_\_ Exp. date: \_\_\_\_\_

Signature \_\_\_\_\_

Payments may be made in person to the cashier at Emmanuel College, Aaron #103, 181 Spring Street Franklin Springs, or mailed to:

Emmanuel Arts Academy  
Attn: Dr. Deborah Herring  
P.O. Box 129  
Franklin Springs, GA 30639

## MISSION STATEMENT & POLICIES

### Mission Statement

Emmanuel Arts Academy is an extension of Emmanuel College. The College's institutional mission states *Emmanuel College is a Christ-centered, liberal arts institution which strives to prepare students to become Christ-like disciples who integrate faith, learning, and living for effective careers, scholarship and service.* Emmanuel Arts Academy is committed to carry on this important mission by offering quality professional instruction integrating faith and the arts in our Northeast Georgia community.

### Attendance

No make-up lessons are offered for classes or group instruction. For **private lessons**, it is an expected courtesy to notify your instructor when you cannot attend a class or lesson; however, no refund or credit will be made for a missed lesson. One excused absence is allowed per semester with notification 24 hours in advance to the teacher. This make-up lesson will be scheduled at a time mutually convenient for the student and the instructor.

### Refunds

Notice of intention to withdraw must be received, in writing, by the Academy Director, Dr. Deborah Stark. Refunds are an exception to the policy and are considered only when the full tuition and fees have been paid and the student withdraws before the beginning of the fourth week of the semester. In such cases, 100 percent of the tuition will be refunded if the student withdraws before classes or lessons begin; 75 percent of the tuition is refundable during the first week; 50 percent during the second week; and 25 percent during the third week of the semester.

### Permissions

The Emmanuel Arts Academy reserves absolute rights to use, reproduce, copy, exhibit, or distribute any videotape, audiotape, photographs, computer files or media files in which a student may be included for Academy publicity, newsletters or other promotional purposes.

### PARENTAL AGREEMENT AND PLEDGE

Enrolling a child in Emmanuel Arts Academy is an investment in his or her future enjoyment and participation in the arts. Arts training requires specialized skills that only come with practice and effort. Students need encouragement and parental partnering to stay committed to class attendance and to help them develop self-discipline through regularly scheduled practice. We ask that parents/guardians pledge the following:

- I will encourage my child in his/her studies and completion of practice requirements. I will ensure my child attends all scheduled classes with the necessary materials and arrives on time.
- I understand the mission and policies of Emmanuel Arts Academy and have included my payment as outlined above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date