TUITION REFUND POLICY

By signing this agreement, students/guardians are legally bound to pay all tuition and fees to the Training Program, regardless of whether the student terminates the program before completion due to injury, illness, or other circumstances. Special situations will be reviewed on a case-by-case basis.

Should a reimbursement be requested, for legitimized reasons as stated below, reimbursement percentages will be pro-rated according to the weeks in attendance of the full program (35 weeks), not including misconduct by the student. Refunds will only be granted if tuition payment is current. The percentages below reflect this understanding.

Any costs incurred by LINES Ballet | Training Program on the behalf of the student for terminating participation will be billed to the student/guardian (transportation costs, medical supplies etc.).

Refunds: After registration until August 20
Refunds requested for any reason two or more weeks prior to the start date of the program will be refunded 100% of payments made to date, less the non-refundable deposit amount and processing fee (3.16%).

Refunds under Special Circumstances
For injury/sickness with a doctor’s note, serious family emergencies (death/major health issue in immediate family, natural disaster, financial crisis), or other special circumstances, the following refund rates apply. Approval from the Program Director is required.

<table>
<thead>
<tr>
<th>Refund Request Submitted</th>
<th>Percent Refunded</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 21 until Week 3 of program</td>
<td>75% of payments made to date</td>
</tr>
<tr>
<td>Week 4-8</td>
<td>50% of payments made to date</td>
</tr>
<tr>
<td>After Week 8</td>
<td>0%</td>
</tr>
</tbody>
</table>

Scholarship Applicants
If you have submitted a scholarship application to TADS by the due date, you are eligible for a refund of the deposit, less a $50 processing fee, on or before the program registration due date.

I have read and understand all terms in the Tuition Refund Policy

Print Student Name: ________________________________________
Student Signature: ________________________________________ Date: ____________

**A guardian’s signature is required for students under 18
Print Name of Parent/Guardian: ________________________________
Signature of Parent/Guardian: ________________________________ Date: ____________