



TUITION AGREEMENT: POCO A POCO 2024-2025 SEASON

Singer's Name: _____

A \$45 non-refundable registration fee (or \$60 per family) is due with registration.

Tuition is due in full or is payable in monthly payments due according to the following schedule. Families with more than one singer enrolled in the NYC will pay full price for the singer in the highest tuition choir, and receive a 10% discount on the tuition of the other singers in the family.

	Annual Tuition	Sep. 1	Oct. 1	Nov. 1	Dec. 1	Jan. 1	Feb. 1	Mar. 1	Apr. 1	May 1
Tuition Schedule	\$351.00	\$39.00	\$39.00	\$39.00	\$39.00	\$39.00	\$39.00	\$39.00	\$39.00	\$39.00
Tuition Schedule w/ 10% Sibling Discount	\$315.90	\$35.10	\$35.10	\$35.10	\$35.10	\$35.10	\$35.10	\$35.10	\$35.10	\$35.10
Afterschool bus, snack & programming	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Uniform costs:

Every singer is required to have a uniform. Estimated uniform costs are \$20 per singer. NYC will place a bulk order for uniforms, helping to reduce shipping costs. You will receive an invoice for actual uniform costs based on current prices and items purchased.

- I agree to pay my child's tuition in full or in equal payments according to the schedule above.
- NYC will send a tuition invoice via email at the beginning of the season. Please contact the office if you have any questions or need to have it resent.



This activity is made possible by the voters of Minnesota through a grant from the Minnesota State Arts Board, thanks to a legislative appropriation from the arts and cultural heritage fund.



Tuition Assistance Application

All information on this form is kept strictly confidential. Financial assistance is awarded by a committee of the NYC Board of Directors. Please fill out this form completely and provide the committee with as much detail as possible to assess need.

Singer's name: _____

Parent/Guardian name(s): _____

Address: _____

Email Address: _____ Phone Number: _____

Number living in household: _____ Single parent household: Yes No

Yearly gross income (combine all sources for last 12 months): \$ _____

Unusual expenses or Special considerations:

Please estimate the amount you're able to pay:

- I have paid the \$45 non-refundable registration fee (\$60 per family)
- I am not able to pay the registration fee. Please consider it part of my assistance request.

I verify that all of the information included on this form is accurate and complete to the best of my knowledge.

Parent/Guardian Signature(s): _____

Date: _____

Return this completed form via email to scholarship@northfieldyouthchoirs.org, or by postal mail to:
Northfield Youth Choirs Scholarship Committee
PO Box 460
Northfield, MN 55057