

**SALISH DANCE CLASS CONTRACT**

By signing below, I have read, understood and agreed to the descriptions, rules, expectations, and assessment methods of this course as described in the digital course outline and parent welcome letter. I also understand that if a student does not follow studio procedures or maintain student expectations, a follow up parent-teacher meeting will be arranged. If there are any issues or concerns I agree to notify Ms. Jensen as soon as possible via email.

**Student Expectations**

* I agree to abide by all of the behavioral expectations in this course as outlined in the DANCE PROFESSIONALISM/WORK HABITS RUBRIC.
* I agree that it is my responsibility to take ownership of my learning and to keep myself updated on important news and events that involves this class. I acknowledge that all further notices, permission forms and announcements will be distributed through my FreshGrade account and Microsoft TEAMS. Paper handouts will no longer (or very rarely) be distributed.

**Attendance**

* I acknowledge that dance is a participation-based course and that attendance is a critical. I agree that if I am absent for more than 15% of the course, it will result in a failing/incomplete grade.
* I agree that both in class and public performances are a mandatory component of this course. I agree that is my responsibility to negotiate scheduling and to ensure that I am in attendance at all performances.
* I agree to communicate with Ms. Jensen as soon as possible if I am not able to attend a performance and will provide all necessary documents and make-up assignments. Otherwise, an incomplete standing in this course will result.

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Student Signature                               Student Name (Please Print Clearly)                  Date MM/DD/YY

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Parent / Guardian  Signature         Parent / Guardian Name (Please Print Clearly)   Date MM/DD/YY

Parent Email for Parent-Teacher Communication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_