## 0500 N. Arrowhead Trafficway

Office Use Only:

Templates: QBO: \_\_\_\_\_

Bank: \_\_\_

Sycamore: \_\_\_

Sycamore Family #: \_\_\_

## TUITION PAYMENT AGREEMENT Please complete ALL sections of this form. Incomplete forms may delay enrollment. STUDENT INFORMATION Name(s) Campus 2020-21 Name(s) Campus 2020-21 Grade Grade KCN LIB PLC PRESCHOOL (BlazerBits) / PRE-K (KinderPrep) ONLY Circle Full or Half Days: FULL Circle desired days of attendance: **PAYMENT FREQUENCY** (check one) Payment in Full Payment must be received by August 1 to elect for this option. Payments Starting on June 1\*\* Semester Payments June 1 & December 1 Quarterly Payments June 1, September 1, December 1, and March 1 12 Monthly Payments 1st OR 15th of each month starting in June, ending in May (indicate 1st or 15th) 24 Bi-Monthly Payments 1st AND 15th of each month starting June 1st, ending May 15th Payments Starting after June 1 10 Monthly Payments 1st OR 15th of each month starting on or before August 1st/15th (indicate 1st or 15th) 20 Bi-Monthly Payments 1st AND 15th of each month starting on or before August 1st, ending 19 payments after initial payment \*\* These options are only available if payment schedule is brought current to selected schedule. **PAYMENT INFORMATION** If paying by ACH using a CHECKING / SAVINGS account, please attach a voided check / bank letter to this form. If remitting payment with a CREDIT CARD, please provide the information below. Note: an additional fee of 3% for credit card and Paypal transactions will be added to the total annual tuition payment above. Payments will begin and continue at full tuition price according to the plan selected above. Financial Aid applicants: All applications and requested documents must be received IN FULL and aid awarded in order to append this agreement. Visa MasterCard ■ AMEX Discover (Check, Debit, or ATM Cards may be returned unpaid due to daily limit restrictions imposed by your bank.) Credit Card Account Number Expiration Date Month: Year: PAYING PARTY PAYMENT AUTHORIZATION (Person(s) responsible for making payments) Name (Please Print) Signature Date Name (Please Print) Signature Date By signing this agreement, I (we) hereby agree to be the responsible party whether or not named as the responsible party in Section 2 above, and I hereby accept and agree t be bound by the terms and conditions contained within this Tuition Payment Agreement and authorize NORTHLAND CHRISTIAN EDUCATION SYSTEM (NCES), to initiate debit/charge entries to the account above or any subsequent account provided and to debit/charge the same such account. I (we) acknowledge the origination of debit/charge transactions to the account must comply with the provision of U.S. law. TERMS AND CONDITIONS By signing this agreement, the responsible party agrees to be bound by the terms and conditions stated within the Tuition Payment Agreement until the amount owed under the agreement is paid in full. The authorization will terminate automatically after the amount owed under this Agreement has been paid in full. 2 The responsible party agrees and acknowledges that, as a condition of enrollment of the students listed above, with NCES for the 2020-21 school year, he/she agrees to be, and is liable for the full amount of tuition, enrollment, book, and other fees and expenses for the school year. This obligation is a joint and several obligation so that each of the responsible parties is liable to NCES for the full amount of fees and expenses. The responsible party authorizes NCES to use payment information provided above to collect any unpaid balance upon the withdrawal of student(s). A \$20 returned payment fee will be charged for an initial payment by ACH or check that is returned. 4. 5. ACH and credit card payment dates that fall on a non-business day or federal banking holiday will be attempted on the next available business day. NCES will specify the date each payment will occur, but the day your payment is debited to your account will be determined by your financial institution. Payments returned by your financial institution may be automatically reattempted depending on your financial institution's policy. You may revise information provided in this agreement by contacting NCES's finance office. NCES requires 10 days written notice before the next scheduled payment for any change to take effect. 8. s received 5 business days after the due date will be assessed a late fee of \$20. Fees are subject to change in future academic years. No official transcripts, certificates, or diplomas will be issued until the final payment is received and paid in full as outlined in the Parent/Student Handbook.