



# Westfield CSI Final Payment Form

Thank you for registering for the Westfield CSI Summer Residential Program. We received your deposit and a spot in our summer program has been reserved.

Please fill out the payment information below and return to us by June 17, 2016. All required forms in this packet are due with this payment by June 17, 2016. If we do not receive final payment by the due date, you forfeit your spot in the summer program; your deposit is non-refundable.

Student's Name: \_\_\_\_\_

**Payment Information**

Total cost for summer program:	<b>\$900.00</b>
Deposit paid:	<b><u>- 500.00</u></b>
Amount due:	<b>\$400.00</b>

**Payment Options (Choose one):**

\_\_\_\_\_ Check number: \_\_\_\_\_ Amount: **\$400.00**

\_\_\_\_\_ I would like to pay by credit card  
\_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ American Express \_\_\_\_\_ Discover

Credit Card number: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Amount: **\$400.00** Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

**Please mail or drop off to:**  
Westfield State University/DGCE  
Attn: Jessica Tansey  
577 Western Avenue ~ PO Box 1630  
Westfield, MA 01086  
**OR** fax form to: (413) 572-5227  
\*Please do not fax payment information.