Progressive Arts Alliance 9th Annual RHAPSODY Hip-Hop Summer Arts Camp Payment Plan Contract

Date:	Parent/G	uardian Name:
Name of Stude	nt(s):	
Address:		
City/State/Zip:		
E-mail:		Phone: ()
Regular Registr Late Registratio A 10% Discount Extended Day C Extended Day C	on: \$225 before ation: \$275 May on: \$300 after Ju will be given to Option 8-9 am - 5 Option 5-6 pm - 5	15-July 2, 2010 uly 2, 2010 additional student registrants from the same household. \$25/week (per student not household, no discounts) \$25/week (per student not household, no discounts)
Installment Pay	ment Plan Fee:	\$15 (fee is non-refundable)
Total amount o	wed \$	(beginning balance = registration fees + installment fee)
***Please attacl	n completed car	mp registration form to this form. ***

STEP 1: INITIAL PAYMENT

Initial Payment Amount: \$ _	(Including Application Fee)
Remaining Balance: \$	(Beginning Balance MINUS Initial Payment)

STEP 2: SUBSEQUENT MONTHLY PAYMENTS

(of Remaining Balance from Step 1)

Payment Date	Payment Amount	Balance
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PAYMENT PLAN TERMS AND CONDITIONS

- 1. A non-refundable Payment Plan Fee (\$15.00) is required to pay in installments and must be paid in the initial installment plan payment.
- The total registration fee must be paid in full by the morning of the first day of camp July 19, 2010. Students will not be permitted to participate in the first day of camp if their registration is not paid in full.
- 3. The initial and subsequent monthly payment amounts are determined by the customer. Changes must be received in writing by the 15th of the month prior to the next scheduled payment. Payments that are missed or paid later than agreed will incur a service charge of \$10.00 for the first missed payment and \$15.00 for the each additional missed payment. If you deviate from the set payment amounts (as agreed on this form) without first arranging it with Progressive Arts Alliance prior to the 15th of the month prior, you will default from the plan and registration is not necessarily guaranteed for your student.
- 4. A Returned Check Fee of \$40 will be charged to any returned check.

I, the undersigned, agree to make payments on the specified dates in the agreed amounts stated on the payment schedule on page 1 and agree to all Terms and Conditions of the Payment Plan Contract. I agree to remain current with this payment plan. I understand that this letter is itself a binding agreement to make payments to Progressive Arts Alliance for the 2010 RHAPSODY Hip-Hop Summer Arts Camp. If I default on these payments, I understand that my student will not be permitted to participate in the camp and my installment payment plan fee will not be refunded.

Signature of Parent/Guardian Applicant