

## **Installment Agreement To Pay Debt**

Date:			
To:			
This letter serves to confirm our agreement of, 20, in which you acknowledge the outstanding overdue debt of \$ to the Evanston Youth Hockey Association (EYHA). We agreed that you shall make consecutive (monthly / weekly) payments of \$ until the debt is satisfied in full. We further agreed that EYHA would receive the first payment by, 20 and each successive payment every thereafter. At the bottom of this form is an area to populate your checking account information or credit card information for auto payments. If there are any issues with receipt of payment and subsequent fees are levied to EYHA, you agree to reimburse EYHA for these fees and provide a new form of payment within 7 days of the occurrence.			
I sincerely appreciate your cooperation in resolving this matter. Finally, would you acknowledge our agreement by signing the enclosed copy of this letter and returning it to EYHA by mail, email or in person to an officer of Evanston Youth Hockey Association.			
My signature below affirms my agre	eement to repay debi	t to EYHA	
Signature	Date		
Print Name		_	
Checking			
Bank Name:			
Account Number:			
Routing Number:			
Credit Card			
Credit card #Name on card:			Panel code
Billing address:			
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Cardmember acknowledges receipt of goods and/or services in the amount shown herein and agrees to perform the obligations set forth in the Cardmember's agreement with the issuer.