

SCAA DEFERRED PAYMENT PLAN PROMISSORY NOTE

Student Name

Student ID (office use)

Option 2 – Payment in Full upon Receipt of the October Billing Statement

The student/parent/guardian/payer will receive a billing statement in early October. The account balance is due in full by October 25. If full payment is not received by October 30, a late fee of \$20 will be charged to the account, a payment plan will automatically be set up, and the 3% set-up fee will be applied to the tuition.

DEFERRED PAYMENT PROMISSORY NOTE

I understand that full payment is due by the 25th of October. If the account should become delinquent, I understand that I will be responsible for any additional collection and/or attorney fees. Payments that are more than 60 days late may cause discontinuation of classes or lessons. I agree to pay all costs involved in the collection of any outstanding debts attributed to a default on payment.

Signature of Parent/Guardian/Payer

S.S.N. (required when deferring payment)

Date

Option 3 – Payment Plan

The payment plan for **Session I (Fall)** will divide the tuition into three monthly installments **October – December**. The payment plan for **Session I/Session II (Full year)** will divide the tuition into six monthly installments **October – March**. There is a 3% setup fee based on the total tuition and is included in the payment plan total. The student/parent/guardian will receive by mail, a billing statement each month. A late fee of \$20 will be charged to your account EACH MONTH your payment is received after the date indicated on the statement.

DEFERRED PAYMENT PLAN PROMISSORY NOTE

I understand that all payments are due by the 25th of the month. If the account should become delinquent, I understand that I will be responsible for any additional collection and/or attorney fees. Payments that are more than 60 days late may cause discontinuation of classes or lessons. I agree to pay all costs involved in the collection of any outstanding debts attributed to a default on payment.

Signature of Parent/Guardian/Payer

S.S.N. (required when deferring payment)

Date

Option 4 – Automatic Credit/Debit Card Payment Plan

The payment plan for **Session I (Fall)** will divide the tuition into three monthly installments **October – December**. The payment plan for **Session I/Session II (Full year)** will divide the tuition into six monthly installments **October – March**. The SCAA office will automatically bill your credit or debit card* each month between the 25th and 30th of each month. There is a 3% set-up fee based on the total tuition and is included in the payment plan total. The student/parent/guardian will receive by mail, a billing statement each month. This billing statement is for your reference only; the SCAA office will process the payments as described above. Your account will not incur late fees as long as the office is supplied with current and active credit card information.

DEFERRED PAYMENT PLAN PROMISSORY NOTE

I understand that all payments are due by the 25th of the month. If the account should become delinquent, I understand that I will be responsible for any additional collection and/or attorney fees. Payments that are more than 60 days late may cause discontinuation of classes or lessons. I agree to pay all costs involved in the collection of any outstanding debts attributed to a default on payment.

Signature of Parent/Guardian/Payer

S.S.N. (required when deferring payment)

Date

Cardholder Name

Credit or Debit Card Number* (circle credit or debit)

EXP Date / CCV Code

Cardholder Signature

Date

**A nonrefundable 1.5% surcharge will be imposed on the transaction amount of credit card payments, which is not greater than the cost of acceptance. A surcharge is NOT imposed on the usage of debit cards.*