

VanderCook College of Music Tuition Payment Plan

MONTHLY PAYMENT PLAN ENROLLMENT FORM

Student Social Security # (last 4 digits): _____

Student's Name: _____

Payer's Name: _____

Payer's Address: _____

Payer's City: _____ State: _____ Zip: _____

Payer's e-mail: _____

Phone: _____

Semester of Plan: Spring Fall Year: _____

Total amount due (after all financial aid has been applied) :\$ _____
The maximum amount due to qualify for a payment plan is \$ 4,500.00

Monthly payment amount: \$ _____

Your first payment is due at the start of the term: **divide your balance due by 5**

*payments will be drawn on the 15th of each month
within the term.*

PAYMENT OPTIONS:

1. AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT (ACH DEBIT) *(Preferred Method)*

Bank Name: _____

Routing Number: _____ Account Number: _____

2. CREDIT CARD: Automatically charge my payment to this card each month.

Card type: Visa Discover MasterCard

Card number: _____ - _____ - _____ - _____

Exp. date: ____ / ____ 3-Digit Sec. Code: ____

By signing, I agree to the terms beginning on the date below and will continue payment until my balance is paid in full by the end of the current semester. If at any time during this agreement I default on a payment, a hold will be placed on my student account prohibiting registration for future terms. I will be restricted from attending classes and may be subject to collections.

Name (print): _____

Signature (required): _____ Date: ____ / ____ / ____

Checks should be payable in U.S. funds to VanderCook College of Music.