

\_\_\_\_\_ cc BRSEF Executive Director

\_\_\_\_\_ cc BRSEF Athlete File

\_\_\_\_\_ cc BRSEF Accounting

## Bryce Resort Sports Education Foundation

### 2012/2013 BRSEF Installment Payment Plan

Participant Name \_\_\_\_\_ Program \_\_\_\_\_

Program Fee \_\_\_\_\_ Transportation Fee \_\_\_\_\_ Total Enrollment Fee \_\_\_\_\_

Participant Name \_\_\_\_\_ Program \_\_\_\_\_

Program Fee \_\_\_\_\_ Transportation Fee \_\_\_\_\_ Total Enrollment Fee \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home # (\_\_\_\_) \_\_\_\_\_ Cell # (\_\_\_\_) \_\_\_\_\_

Father's Name \_\_\_\_\_ Home # (\_\_\_\_) \_\_\_\_\_ Cell # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

I, (Parent/Guardian) \_\_\_\_\_ agree and authorize BRSEF to make the following monthly payment charges to my credit card for BRSEF Program Enrollment/Transportation Fees. I understand that early season/multi-child discounts do not apply to the Installment Payment Plan.

Downpayment \$ \_\_\_\_\_ Date \_\_\_\_\_

August 10 \$ \_\_\_\_\_

September 10 \$ \_\_\_\_\_

October 10 \$ \_\_\_\_\_

November 10 \$ \_\_\_\_\_

December 10 \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Credit Card (Circle One)    Visa    Mastercard    Discover

Name on Credit Card \_\_\_\_\_

Number \_\_\_\_\_

Expiration \_\_\_\_\_ CVC Code \_\_\_\_\_

Billing Address of the Card \_\_\_\_\_

I have read, understand and agree to the terms of this Installment Contract Agreement:

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Parent/Guardian)

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