

# MONTHLY TUITION PROGRAMS

## Multiple Party Financial Agreement



### PRIMARY PARTY INFORMATION

Parent/Guardian First & Last Name		Date	
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Please list all children and the program this agreement will apply to.

Child's First & Last Name		School		Program	
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Child's First & Last Name		School		Program	
Child's First & Last Name		School		Program	

### ENROLLMENT & FINANCIAL AGREEMENT

I agree to abide by the terms and conditions set forth on the Community Education Services website. I understand that all tuition is due by the due date on the monthly invoice (with a 6 day grace period) and tuition must be paid by check/money order/Visa/MasterCard/Discover/American Express/auto-charge.

If the account balance is not paid in full by the due date, a Late Fee may be assessed and the student will not be able to attend effective the next invoice period unless payment is received in full.

I understand that when beginning a program my child may not attend until all registration requirements have been met (i.e., accurate completion of required state documents, submission of immunization records and birth certificate [for preschoolers]), my credit card has been charged for any tuition due and I have received a confirmation message with a start date.

### MULTIPLE PARTY PAYER INFORMATION

The following must be completed to bill multiple parties. The percentages must equal 100%.

Primary Owner		Monthly Tuition Percentage		%
Secondary Owner		Monthly Tuition Percentage		%

### PROVISIONS AND SIGNATURE

My signature indicates that I am aware of and give my consent to the practice of informing both parents/guardians of non-payment and that I have read and agree to the terms set forth on the Community Education Services Programs website, and agree to pay the balance of split tuition as indicated above by the due date.

<b>Primary Owner</b> Printed Name		Signature		Date	
<b>Secondary Owner</b> Printed Name		Signature		Date	

For Office Use Only

Date Received \_\_\_\_\_ CES Representative \_\_\_\_\_