

ENROLLMENT CONTRACT

Academic Year: _____

Student Name: _____

PAYMENT TERMS

Registration Fee: _____

TOTAL TUITION: _____

See payment schedule and breakdown details on page 2

PAYMENT METHOD

■ Credit Card

Card Number _____

Cardholder Name _____

Billing Zipcode: _____

Exp. Date: _____

CVV _____

Day to Charge _____

■ ACH Debit

Routing Number: _____

Account Number: _____

Account Holder _____

Debit Date: _____

■ Post Dated Checks

I will provide _____ post-dated checks of _____ each.

■ Third Party Payment

Name of 3rd Party: _____

Relationship: _____

Contact Information _____

THIS ENROLLMENT CONTRACT WILL ONLY BE ACCEPTED IF ACCOMPANIED BY REGISTRATION FEE & PAYMENT SCHEDULE HAS BEEN FILLED OUT

I hereby enroll my son for the _____ academic year in Yeshiva Zichron Aryeh. I understand that this is a binding obligation toward the Yeshiva and that I will be responsible for satisfaction of his tuition obligation as well as all costs incurred by my son, including damage caused to the Yeshiva property. With my signature I hereby accept the terms of this contract and authorize all payments required herein.

Signature: _____

Date: _____

TUITION DETAIL & BILLING SCHEDULE

TUITION BREAKDOWN

| | |
|------------------|--|
| Component | |
| Registration Fee | |
| Tuition | |
| Room | |
| Board | |

| | |
|-------------------------|--------------------|
| TOTAL AMOUNT DUE | \$18,875.00 |
|-------------------------|--------------------|

PAYMENT SCHEDULE

| | | |
|------------------|-----------------|---------------|
| Payment # | Due Date | Amount |
|------------------|-----------------|---------------|

IMPORTANT NOTES:

- Please do not make any changes to this contract
- For questions regarding billing, contact the financial office