

# YESHIVA OHR HATZAFON

## ENROLLMENT CONTRACT

**Student Name:** Test Student YOH

**Academic Year:** 2024-2025

### PAYMENT TERMS

Registration Fee: .00

- Due at contract signing

☐ Use payment method below

☐ Check enclosed

**TUITION TOTAL: \$525.00**

*See payment schedule and breakdown details on page 2*

### PAYMENT METHOD

☐ **Credit Card**

Card Number:

Exp Date:

Cardholder Name:

CVV:

Billing ZIP:

Charge Date:

☐ **ACH/Bank Transfer**

Routing Number:

Account Number:

Account Holder:

Debit Date:

☐ **Check**

I will mail 1 post-dated checks in the amount of \$525.00 each

☐ **Third Party Payer**

Name:

Relationship:

Contact Information:

### AGREEMENT

I hereby enroll my son for the 2025-2026 academic year in Yeshiva Ohr Hatzafon. 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.

Parent/Guardian Signature:

Date:

# TUITION BREAKDOWN & PAYMENT SCHEDULE

Student: Test Student YOH

## TUITION COMPONENTS

Component	Amount
Registration Fee	750.00
Tuition	8,775.00
<b>TOTAL</b>	<b>9,525.00</b>

## PAYMENT SCHEDULE

Payment #	Due Date	Amount
Registration	At Contract Signing	0.00
1	September 2025	1,677.50

## IMPORTANT NOTES

- Please do not modify this contract in any way
- If you have any questions or concerns please contact the financial office
- Checks should be mailed to Yeshiva Ohr Hatzafon, PO Box 486, Cedarhurst, NY 11516