Approved:	Date:
-----------	-------

2025-2026

Yeshiva Zichron AryehPO Box 486 Cedarhurst, NY 11516
Tel: (347) 619-9074 Fax: (516) 295-5737

ENROLLMENT CONTRACT

1. The following is due at time of sign		
Registration: \$750.00	■ Use Payment Method Bel	ow ■ Check Enclosed
2. Total Amount Due: \$12,875.00		
■ Enclosed Payment in Full■ 10 Monthly Payments of \$1,287.50) ooob	
Payment Schedule: September 2025		
3. Payment Method (check one):		
■ Credit Card	■ ACH Deb	it
■ Post Dated Checks	■ Third Par	ty Payment
Credit Card Information:		
E	Exp Date	
E	Billing Zip	Day to Charge
ACH Debit Information:		
Name on Account		
Routing Number	Account Number	
Day to Debit		
Post Dated Checks:		
I will provide 10 post-dated checks o	f \$1,287.50 each	
Third Party Payment:		
Name of 3rd Party		
	ONTRACT WILL ONLY BE ACC FEE & PAYMENT SCHEDULE	CEPTED IF ACCOMPANIED BY HAS BEEN FILLED OUT
binding obligation toward the Yeshiva as all costs incurred by my son, inclu	a and that I will be responsible fo	Zichron Aryeh. I understand that this is a or satisfaction of his tuition obligation as we hiva property. With my signature I hereby

TUITION DETAIL & BILLING SCHEDULE

Student: Test Student

Academic Year: 2025-2026

TUITION BREAKDOWN

Component	Amount
Tuition	\$12,875.00
Registration Fee	\$750.00

TOTAL AMOUNT DUE \$13,625.00

PAYMENT SCHEDULE

Payment #	Due Date	Amount
1	September 15, 2025	\$1,287.50
2	October 15, 2025	\$1,287.50
3	November 15, 2025	\$1,287.50
4	December 15, 2025	\$1,287.50
5	January 15, 2026	\$1,287.50
6	February 15, 2026	\$1,287.50
7	March 15, 2026	\$1,287.50
8	April 15, 2026	\$1,287.50
9	May 15, 2026	\$1,287.50
10	June 15, 2026	\$1,287.50

IMPORTANT NOTES:

- Late payments may incur additional fees
- Payment method changes must be submitted in writing 30 days in advance
- For questions regarding billing, contact the financial office
- This contract is binding for the full academic year