

Approved: _____ Date: _____

2025-2026

Yeshiva Zichron Aryeh

PO Box 486 Cedarhurst, NY 11516

Tel: (347) 619-9074 Fax: (516) 295-5737

ENROLLMENT CONTRACT

Student Name: John Test Student

1. The following is due at time of signature:

Registration: \$750.00

■ Use Payment Method Below

■ Check Enclosed

2. Total Amount Due: \$18,875.00

■ Enclosed Payment in Full

■ 10 Monthly Payments of \$1,587.50 each (September 2025 - June 2026)

3. Payment Method (check one):

■ **Credit Card**

CC Number

Exp Date

12/26

CVV

123

Cardholder Name

John Test Student

Billing Zip Code

11516

Day to Charge

15

■ **ACH Debit**

Name on Account

Routing Number

Account Number

Day to Debit

■ **Post Dated Checks**

I will provide 10 post-dated checks of \$1,587.50 each

■ **Third Party Payment**

Name of 3rd Party

TUITION DETAIL & BILLING SCHEDULE

Student: John Test Student

Academic Year: 2025-2026

TUITION BREAKDOWN

Component	Amount
Registration Fee	\$750.00
Tuition	\$12875.00
Room	\$2500.00
Board	\$2750.00
TOTAL AMOUNT DUE	\$18,875.00

PAYMENT SCHEDULE

Payment #	Due Date	Amount
Registration	Due at signing	\$750.00
1	September 15, 2025	\$1,587.50
2	October 15, 2025	\$1,587.50
3	November 15, 2025	\$1,587.50
4	December 15, 2025	\$1,587.50
5	January 15, 2026	\$1,587.50
6	February 15, 2026	\$1,587.50
7	March 15, 2026	\$1,587.50
8	April 15, 2026	\$1,587.50
9	May 15, 2026	\$1,587.50
10	June 15, 2026	\$1,587.50

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