

## **Term Payment Plan Enrollment Form**

| Fall 2018   | Spring 2019  |   |
|---|--|---|
|   | Student Name   | Student ID Number   |
|   | Applicant Address  | Applicant Telephone Number  |
|   | City, State Zip  | Applicant Email Address   |
| payment plan, stud<br>payment. The total<br>Housing, and Librar                     | ents must pay a participation f<br>monthly payment is one quart            | rged over a four month period each semester. To enroll in the<br>fee of \$50 per semester, to be included with your first<br>ter of the total balance (Tuition, Fees, Health Insurance,<br>any credits (Scholarship, Loans, Grants, and Previous<br>on the first day of classes.      |
| this payment. If you<br>the month and a ho<br>privileges and will b                 | u have not made your paymen<br>ld will be placed on your accou             | month, and there will be a grace period of five days to make at by the 5 <sup>th</sup> , a late charge of \$25 will be assessed on the 6 <sup>th</sup> or unt. If you fail to make two payments you will lose building fice. You will not be able to attend class until you have made |
| Please make all checl   | ks payable to "San Francisco Cons  | servatory of Music" and mail to:  |
| Attn: Jan Vierra<br>San Francisco Consers<br>50 Oak Street<br>San Francisco, CA 941 |  |   |
| If you would like to p authorization form.  | ay by credit card and be charged   | automatically each month please fill out the credit card  |
| stop unless authorize become due and paya   | d by the Business Office. Upon de<br>able. I further agree to pay all cost | ts as determined on the attached statement. Payments will not efault, the balance due for the remainder of the semester shall ts of collection and a reasonable attorney's fee if such action is charged after the 5 <sup>th</sup> of each month.                                     |
|   | Signature  | Date  |