



## PAYMENT OPTIONS FORM

Account Holder Name: \_\_\_\_\_

Student Name(s): \_\_\_\_\_

### OPTION 1:

#### Auto-Payment Enrollment | *Credit Card Required*

- Please provide credit card info in the online application or via the secured Teachworks Link sent to your email within the next 3 days.
- Payments processed the day before the due date (EI: if invoice due on the 23, payment processed on the 22)
- It is the payer's responsibility to keep this information updated to ensure payment are processed in a timely manner by the due date and to avoid late fees.

(please circle Yes or No)

NO YES | I, \_\_\_\_\_, understand I will be responsible for all tuition charges incurred while the student(s) mentioned above is enrolled at MCoFM and for submitting payments in a timely manner according to the current payment policies. I do, hereby authorize MCoFM to charge my credit card. I agree that I am either the cardholder or the authorized individual to make this purchase. I am responsible for maintaining this information up to date.

Signature and Date: \_\_\_\_\_

### OPTION 2:

#### Regular Monthly Payment | *\$100 Deposit Required*

- The MCoFM requires a deposit of \$100 from all students holding a permanent schedule, unless enrolled in automatic payments.
  - *Deposit is non-refundable. This deposit will be disbursed into the student's account after a termination notice is received (minimum two weeks' notice) to stop all lessons. Students are responsible for handling this credit.*
  - *Options to redeem deposit are: 1. To use towards last invoice. 2. To schedule additional lessons. 3. Donate to the scholarship fund.*
- Students are responsible for paying any and all outstanding balances. Unused funds will be kept for a three month period after which it will be transferred towards the MCoFM Scholarship Fund.
- Account holders will receive monthly invoices via our online system. (refer to "Payment Policies")
- Payer is responsible for submitting payment on the due date and abide by the policies.

(please circle Yes or No)

NO YES | I, \_\_\_\_\_, understand I will be responsible for all tuition charges incurred while the student(s) mentioned above is enrolled at MCoFM and for submitting payments in a timely manner according to the current payment policies. I understand and agree to the deposit terms and conditions and will abide by all payment policies in place

Signature and Date: \_\_\_\_\_