



AFTERSCHOOL CLUB SCHOOL YEAR 2008-09 PAYMENT FORM

***** IMPORTANT INFORMATION *****
- PLEASE FILL OUT FORM COMPLETELY & MAIL.

 **Child's Name:** _____ **School Attending:** _____

REGISTER EARLY & SAVE!!!

*** Register on or before July 2, 2008... Only \$30 REGISTRATION* per child.**

\$10 INSTANT SAVINGS ON YOUR REGISTRATION FEE

** \$50 deposit per child with registration. Deposit goes toward last week registered. \$40 Registration Fee per child*

Note: Registration Fee is non-refundable

PAYMENTS

CHOOSE ONE:

- Check** (Make payable to: Afterschool Club) **Charge my credit card** (Fill out below)

Customer Information:

 (Payments will be processed in advance each week)

Cardholder's Name: _____

Legal Guardian #1 (as it appears on Registration Form): _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Charge my Credit Card/Debit Card:

 (Payments will be processed in advance)

- WEEKLY** **REGISTRATION & DEPOSIT ONLY**

Type of Card:    Exp. Date: _____

Credit/Debit No.: _____

Cardholder Signature: _____ **Date:** _____

By signing below, you understand and agree to JLR Enterprises, Inc./Afterschool Club's tuition payment terms and authorize JLR Enterprises, Inc. (d/b/a Afterschool Club) to process your tuition payments weekly prior to your child's participation in the program. JLR Enterprises, Inc. will securely maintain your credit card information. As the parent/guardian/responsible party, your signature indicates your understanding and agreement that you are responsible for advanced weekly tuition payments whether or not your child attends or is absent for any reason. You are responsible for providing to JLR Enterprises, Inc./Afterschool Club at least one week's advance written notice of any permanent changes to your child's program schedule or withdrawal from the program. You understand that you are responsible for updating with JLR Enterprises, Inc./Afterschool Club any changes to your credit/debit card information, including card number, expiration date, card verification number, and billing address changes.

Your signature indicates your understanding and agreement that returned checks and declined credit/debit card payments will incur a \$29.00 processing fee. Your signature provides authorization for this processing fee. Your signature also indicates your understanding and agreement that you will be responsible for all costs associated with collecting any debts more than 30 days past due, including costs for attorneys' fees, filing fees, interest, and court costs. In the event of a payment more than one week past due, your child may be dismissed from the program. If your child is allowed to return, you will be required to make payment in full for the past due amounts along with an advance payment before readmitting your child to the program.

Legal Guardian Signature: _____ **Date:** _____