

OVERVIEW

A four-month payment plan option is available to all students. The amount covered by the payment plan is equal to the total tuition and fees less the application fee, tuition deposit, and any financial aid awarded. Families who do not apply for financial aid, or apply for but do not receive financial aid, will be assessed a service charge of \$50 for using the payment plan. The service charge will be added to the first payment of the plan. Families who receive financial aid will not be assessed a service charge for using the payment plan. The first payment of the payment plan is due upon the student's acceptance to the program, and subsequent payments are due on the 15th of each month following.

APPLICANT INFORMATION

Applicant's Name _____
FIRST MIDDLE INITIAL LAST

Mailing Address _____
STREET ADDRESS CITY STATE ZIP

Home Phone (_____) _____ E-mail _____

CREDIT CARD INFORMATION *(Required for ALL payment plan applicants)*

All payment plan participants must include valid credit card information to be eligible for the payment plan. If you choose the credit card option for monthly payments (see below), this credit card will be charged according to the payment plan schedule included in the acceptance packet. If you choose the check or money order option for monthly payments, this credit card information will be kept on file and will be used *only* in the event that an account becomes delinquent. In the event that a scheduled payment is missed, the entire remaining tuition balance will be charged to the credit card below.

Credit Card Type Mastercard Visa

Credit Card Number _____ Expiration Date _____
MUST EXPIRE AFTER 12/31/09

Name on Credit Card _____ Billing Address Zip Code _____

PAYMENT OPTIONS

I wish to make monthly payments by check or money order.

Please send monthly payment plan coupons with the acceptance packet.

I wish to make monthly payments by credit card.

Please charge the credit card above according to the payment plan schedule included in the acceptance packet.

CERTIFICATION

I would like to use the payment plan to pay the tuition and fees assessed for my child to participate in CivicWeek if he/she is accepted. I have read the information above and agree to abide by all program rules and policies. I further understand that the Civic Education Project will charge the entire remaining tuition balance to the credit card account designated above in the event that a scheduled payment is missed. I understand that should my child withdraw from the program less than two weeks before the program start date or be sent home from the program for any reason, I am still responsible for completing all payments.

PARENT/GUARDIAN SIGNATURE DATE SIGNATURE OF CARDHOLDER (if different) DATE

Send this form with the rest of your application materials for receipt by **February 16, 2009**.

Please retain a copy for your records.

Civic Education Project
 CivicWeek Admissions
 617 Dartmouth Place, Evanston IL 60208-4175
 Fax 847-467-0880