



Payment Plan Agreement– 200 Hour Teacher Training

Choose A Payment Method

Option One: Credit Card Authorization

I, _____, authorize and request Yogaspirit Studios, hereinafter called Company, to effect payment for any amounts owed by me to Company as such amounts become due by initiating credit/debit entries to my account indicated below on the charge named below, hereinafter called the Charge Card Company, to accept any credit/debit entries initiated by Company to such account, and to credit/debit the same to such account without responsibility for the correctness thereof.

Statement will not be sent to Electronic Funds Transfer (EFT) students. My balance is available at any time in the administrative office and I will receive a receipt via email to the email address supplied in this agreement. The balance of my account for a particular month will be processed through the credit card named below not before the first or after the seventh day of each month. Any disputed entries on my account may be adjusted. Balances paid by PayPal or check must be made to the administrative office no later than the **27th of the previous month** to avoid automatic electronic transaction to my supplied credit card on the **1st of the following month**. If I wish to terminate automatic credit/debit card payments and pay by PayPal or check as outlined below, I must provide 30 days' written notice.

Option Two: PayPal

I, _____, authorize and request Company to email me a PayPal invoice prior to the due date of each monthly payment. I will then create a PayPal account if I do not already have one, and will send my payment to Company via PayPal's electronic payment services. If my PayPal payment has not been received by Company **within 7 days of the due date**, my credit card on file will be charged for said payment. If I wish to terminate PayPal payments and pay by Option One or Three outlined above and below, I must provide 30 days' written notice.

Option Three: Check

I, _____, promise that I will send a personal or business check, or money order, to Company, **postmarked within 7 days of the due date** of my payment. If the check is not received **within 15 days of the due date**, my credit card on file will automatically be charged. Checks should be made out to Yogaspirit Studios and sent to 15 Junction Lane, South Hamilton, MA 01982. If I wish to terminate check payments and pay via Option One or Two as outlined above, I must provide 30 days' written notice.

I understand that this agreement is a 7 month contract. By authorizing this Payment Plan Agreement, I am committing to the payment form and fee schedule described below.

I have read, agree with and understand the above information. Initials: _____

Billing Information - Select A Plan

Credit card information is required for all Payment Plans as backup payment form. The credit card supplied will only be charged if (a) it is the preferred payment method, (b) PayPal payments are not received within 7 days of the due date, or (c) Check payments are not received within 15 days of the due date. Payments are due the 1st of each month.

Select Payment Method

Plan type may be changed with 30 days' written notice.

- Credit Card Authorization** (provide credit card information below and email for e-receipt)
Email: _____
- PayPal Invoice** (provide email address and credit card information below as a backup)
Email: _____
- Check** (provide credit card information below as a backup)

Required Credit Card Information:

Credit Card: Type of Account: **MC** **VISA** **DISC** Expiration Date: _____/_____/_____

Card#: _____ Security Code: _____

Name on Card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ (Cell): _____

Email: _____

Please select your Payment Plan from the table below:

Payment Plan*	Payment Amount	Deposit	No. of Payments	Total Cost
<input type="checkbox"/> Tuition in Full	\$3,610.00	N/A	1	\$3,610.00
<input type="checkbox"/> Half Yearly	\$1650.00	\$500.00	2	\$3,800.00
<input type="checkbox"/> Quarterly	\$858.00	\$500.00	4	\$3,932.00
<input type="checkbox"/> 10 Month	\$396.00	\$500.00	10	\$4,196.00

***\$500 Deposit** is due upon enrollment for all Half Yearly, Quarterly and Monthly Payment plans. **First Installment** payment (cost depending on your Payment Plan of choice) and **Books & Materials fee (\$244)**. Subsequent recurring payments will begin the following 1st of each month (Half Yearly and Quarterly plans will be charged accordingly after First Installment payment is made).

I have read, agree with, and understand the above information. I commit to this Payment Agreement.

Name (printed): _____ Date: _____

Signature: _____

Please return agreement via email: info@yogaspiritstudios.com
or mail to: yogaspirit Studios 15 Junction Lane, South Hamilton, MA 01982 - *Thank you!*