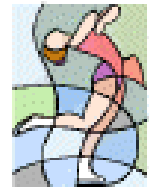




2017-18 PAYMENT PLAN AGREEMENT Spring Session



Responsible Party Information			
Responsible Party Name:	Phone:	hm)	
Address:	Phone	(wk)	
City:	State:	Zip:	E-mail:
Skater Information			
Skater:	USFSA#:		
Skater:	USFSA#:		
Skater:	USFSA#:		

This optional agreement is available to MFSC Club members only. Club members are eligible if their total fees equal \$250 or more.

Payment Plan Schedule		
Today's Date:	Total Amount Due from Spring Club Ice Form:	
#1 Payment #1 = 1/3 of Total above – Ck cashed at Registration		Pmt #1 Amt Due
#2 Payment #2 = 1/3 of Total above – Ck cashed on May 1, 2018		Pmt #2 Amt Due
#3 Payment #3 = 1/3 of Total above – Ck cashed on Jun 1, 2018		Pmt #3 Amt Due

Payment #1 requires a check dated today.

Payments #2 and #3 require post-dated checks for May 1, 2018 and Jun 1, 2018 included with this form.

NOTE: Checks will be automatically deposited on these dates.

All Payment Plans must be approved by the MFSC Treasurer or Accountant.

By signing below, I agree to have the appropriate funds available on the dates indicated above per the agreed upon Payment Plan Schedule.

Responsible Party Signature _____ **Date** _____

MFSC Treasurer/Accountant Signature _____

For Office Use Only:					
Date:	Amt. Paid:	Ck#:	Initials:	Deposited:	
Date:	Amt. Paid:	Ck#:	Initials:	Deposited:	
Date:	Amt. Paid:	Ck#:	Initials:	Deposited:	