



WHO WILL PAY TUITION?

FIRST NAME OF PARENT/GUARDIAN/BILL PAYER _____ LAST NAME OF PARENT/GUARDIAN/BILL PAYER _____ 2010-2011

*FIRST NAME OF ADDITIONAL AUTHORIZED PARTY (OPTIONAL) _____ *LAST NAME OF ADDITIONAL AUTHORIZED PARTY (OPTIONAL) _____

STREET ADDRESS OR P.O. BOX _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

HOME TELEPHONE NUMBER _____ MOBILE TELEPHONE NUMBER _____

EMAIL ADDRESS (SMART EMAILS REMINDERS FOR UPCOMING PAYMENTS) _____

HOW & WHEN YOU WILL PAY?

PLEASE SEND ME INVOICES - MY PAYMENT IS DUE ON THE: Your school only allows the following invoice due dates: 10,20,30

PLEASE DEBIT MY ACCOUNT ON THE: Your school only allows the following debit dates: 10,20,30

PLEASE DEBIT MY CHECKING (PLEASE ATTACH A VOIDED CHECK) OR SAVINGS

9 DIGIT ROUTING NUMBER _____ BANK ACCOUNT NUMBER _____

PLEASE CHARGE MY AMEX DISCOVER MASTERCARD

CREDIT CARD NUMBER _____ EXPIRATION DATE _____

2.5% convenience fees apply to all credit card payments. Smart Tuition does not accept Visa

WHICH PAYMENT PLAN - For the 2010-2011 School Session?

Plan M 9 Payments Sep-May

Plan Q 4 Payments Oct, Jan, Mar, May

Plan S 2 Payments Jan, May

ENTER PLAN LETTER HERE

WHO IS ATTENDING THE SCHOOL?

GRADE: Choose from the following grades: PK,K,1-12

*GRADE	FIRST NAME OF STUDENT	LAST NAME OF STUDENT
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

OPTIONAL SCHOOL FAMILY ID: OPTIONAL TYPE CODE:

PLEASE READ AND SIGN

I have read and agree to the terms and conditions on the reverse side of this document. I agree that the school may automatically re-enroll me in the Smart Tuition payment program for each subsequent school year. I agree to pay the amount established by my school for the students above and realize that if I fail to make payment by the specified due date such inaction will result in a late fee established by my school. I understand that Smart Tuition may contact me via email and telephone when payments are late and charge a follow up fee of \$30.00. A \$25.00 fee will apply for failed auto-debit and failed checks.

PRIMARY BILL PAYER _____ DATE ____/____/____

FOR SCHOOL OFFICE USE ONLY

THIS FAMILY IS ENROLLING LATE.

SPREAD BALANCE ACROSS REMAINING MONTHS OF PLAN

COLLECT BALANCE IN FIRST MONTH

*OPTIONAL STUDENT IDs

<input type="text"/>	STUDENT 1 TUITION:	\$	<input type="text"/>	<input type="text"/>
<input type="text"/>	STUDENT 2 TUITION:	\$	<input type="text"/>	<input type="text"/>
<input type="text"/>	STUDENT 3 TUITION:	\$	<input type="text"/>	<input type="text"/>
<input type="text"/>	STUDENT 4 TUITION:	\$	<input type="text"/>	<input type="text"/>

FAMILY TUITION SUBTOTAL \$

<input type="checkbox"/>	TOTAL FEES SPREAD ACROSS PLAN	+	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	TOTAL FEES TO PAY IN FIRST MONTH	+	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	TOTAL DISCOUNTS ACROSS PLAN	-	<input type="text"/>	<input type="text"/>

ANNUAL TOTAL DUE \$

PARENT INSTRUCTIONS

Please use capital letters and print clearly.

- WHO WILL BE PAYING TUITION:** Provide us with all of the requested contact information. If desired, use the "Additional Authorized Party" field to allow another person to access your tuition account information and make payments on the account. Please be sure to include your email address, as we may contact you regarding important account information.
- HOW & WHEN WILL YOU PAY:** If you choose to pay by mail, you will receive a bill that will be due on the date selected. Please mail your payment at least seven business days prior to the due date. If you select Auto-Debit, Smart Tuition will debit your account on the due date you select. Please include a voided check to ensure the accuracy of your account information. On the bottom of every check, there is a 9 digit routing number that represents your bank (example below). It is typically located on the left side of the bottom of the check. Smart Tuition can not process automatic payments if the routing number is missing.

JOHN SMITH 123 Smart Lane Anytown, NY 12345	DATE	0123 04-30-10
PAY TO THE ORDER OF	\$	DOLLARS
BANK NAME Anytown, NY 12345	9 DIGIT ROUTING NUMBER	ACCOUNT NUMBER
FOR	DO NOT INCLUDE YOUR CHECK NUMBER	
(4323456789) 01234567890123		10123

Please choose one of the due dates from the available dates provided. If you choose a due date not approved by your school, your account will default to the latest due date available. If your autodebit due date falls on a weekend or holiday, your account will be debited on the following business day.

WHICH PAYMENT PLAN: Please choose one of the plans offered by your school by putting the letter of the plan in the box. Plans are mandated by your school and cannot be changed by Smart Tuition without school permission.

WHO IS ATTENDING THE SCHOOL: Please write in the name and grade of the children who will attend this school.

PLEASE READ AND SIGN: Please review the terms and conditions. The Primary Bill Payer must sign the form.

TERMS AND CONDITIONS

Smart Tuition receives your payments, processes them and deposits the funds into your school's bank account. Our secure website and 24/7 parent help center are available to families that have questions about their tuition payment plans.

Late Enrollment: If Smart Tuition does not receive your enrollment form on time, your first payment date will be moved forward. Your school may require you to catch up any missed payments on your first due date, or will establish a plan with a smaller number of larger payments.

Refunds: Smart Tuition does not issue cash refunds. Overpayments will be carried on your account and credited to future tuition payments. All reimbursements or refunds must be arranged with your school.

Late Fee: Any payment that is not posted by Smart Tuition by your due date is considered late and may receive a late fee. In the event that your account becomes delinquent, Smart Tuition may provide your school a follow-up service which will contact you via mail, telephone, or e-mail. Your account may be charged \$30.00 as a result of this service. This fee is in addition to any late fees charged by your school.

Dishonored Payments: The following fees will be applied to your account for dishonored payments. Your bank may impose additional fees.

Failed Auto-Debit: A fee of \$25.00 will be applied to your account for dishonored payments.

Failed Checks: A fee of \$25 will be applied to your account for a check dishonored by your bank.

Autodebit Terms (Applies only to Autodebit enrollees)

By signing this enrollment form you agree to authorize Smart Tuition to debit your account on the scheduled dates as described on the reverse side. This authority will remain in effect until Smart Tuition receives your written instruction to cancel Autodebit service. You agree that if any such debit is dishonored, for any reason, Smart Tuition shall have no liability for any fees charged to you by your financial institution. Smart Tuition will automatically reattempt any failed debits 10 days after their failure.

Amendments

By signing this enrollment form you acknowledge and agree that such terms and conditions may be amended from time to time by Smart Tuition and such amendments will be reflected on Smart Tuition's website at www.smarttuition.com.

Smart Tuition Privacy Policy

Your privacy is important to us. We do not disclose any nonpublic personal information about our customers or former customers to anyone except permitted by law. Smart Tuition has adopted numerous procedures to protect the confidentiality of school and family information. We adhere to the Payment Security Industries Standard for storing card holder data.



SMART TUITION
Financial Solutions for Schools and Parents™

&

Your School
Have Formed
A Partnership



That Benefits
Your School,
Your Child,
And You.

Please return completed form to your school immediately.

If you have any questions regarding this form, contact Smart Tuition at:

1-888-868-8828