



# Application for Installment Plan – Post Dated Cheques

F 3-5

Please print clearly and fill in all the information below:

Parent/Guardian: \_\_\_\_\_  
LAST NAME FIRST NAME

Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Student name: \_\_\_\_\_ School: \_\_\_\_\_

Student name: \_\_\_\_\_ School: \_\_\_\_\_

Student name: \_\_\_\_\_ School: \_\_\_\_\_

Student name: \_\_\_\_\_ School: \_\_\_\_\_

Total Fees Owed: \_\_\_\_\_ Monthly Installment Amount: \_\_\_\_\_

Date of Application: \_\_\_\_\_

I, \_\_\_\_\_, agree to pay Pembina Hills Public Schools monthly installments for school fees beginning on \_\_\_\_\_ (mm/dd/yyyy) and continuing until the above account is paid in full.

Parent/Guardian signature: \_\_\_\_\_

School Official signature: \_\_\_\_\_

Customer Number: \_\_\_\_\_

Note: Post dated cheques **MUST** accompany this agreement and total the amount owing for the school year or semester.