



STUDENT PAYMENT PLAN AGREEMENT – FEES BALANCE

Students are required to pay their fees balance by the due date each semester as per the academic calendar.

By agreeing to the terms of this Payment Plan Agreement (the “Payment Plan”), you agree to pay Mount Allison University (the “University”) each of the amounts shown below, on or before the dates provided. In return, your semester fees balance will be considered in good standing by the University and no late fees will be applied.

Name: _____ **Student ID #:** _____
Address: _____ **City/Prov/PC** _____
Phone: Home: _____ **Cell:** _____ **Email:** _____
Program: _____

Semester	Year	Fees Balance Owing

Notes:

Schedule of Payments:

	Date	Payment Amount \$
50% down payment		
1		
2		
3		
Total		

Terms:

- Default of one or more of the payments as per above schedule will result in the following:
 - a late pay fee of \$75 added to your account
 - interest on the outstanding amount due at the rate of 1% per month until it is paid
 - you will not be permitted to register for the following term
 - you will not be able to receive school documents (diplomas, transcripts, letters of permission, official confirmations, etc) until the amount due is paid in full _____ Initial
- Default in the above plan will result in your account being referred to a third party collection agency _____ Initial

I acknowledge my outstanding debt to Mount Allison University and agree to pay in accordance with the terms above. If the terms above are not met, I understand a \$75 late payment fee will be applied to my account and all amounts will be due immediately.

I have read, understood and agree to these payment plan terms and acknowledge receipt of copy.

Student Signature: _____ Date: _____

Financial Services Signature: _____ Date: _____