

# BERMUDA COLLEGE



## Payment Agreement Application

Payment Agreement are being offered to Bermuda College students for Fall and/or Spring terms only, based on the following conditions:

- 30% of tuition and fees **must** be paid up front to initiate the Payment Agreement (**non-refundable**)
- Non-Refundable Administration Fee of \$25 will be charged
- 1<sup>st</sup> monthly payment is due January 31 and final payment due by February 28, 2019.
- **A late fee of \$100 and a 'HOLD' will be added to any balances remaining after February 28, 2019.**
- Student **must** be 18 years or older to sign Payment Agreement
- Guarantor form **must** be signed by a second signatory
- Bermuda College is a member of the Bermuda Credit Association

Term (tick one):  Fall \_\_\_\_\_ (year)       Spring \_\_\_\_\_ (year)

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

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

Telephone #s: \_\_\_\_\_ (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c)

BC Email: \_\_\_\_\_

*I agree to pay the amounts owing below on the date stipulated in this Agreement. In failing to do so, Bermuda College will place a hold on my account.*

\_\_\_\_\_  
*Student Signature/Parent or Guardian Signature*

\_\_\_\_\_  
*Date*

Over the age of 18 years Yes / No (circle)

Name of Parent/Guardian

\_\_\_\_\_  
*Parent or Guardian Name*

\_\_\_\_\_  
*Parent or Guardian Signature*

Financial Aid Applicant? Yes / No (circle)

\_\_\_\_\_  
*Director, Counselling & Student Activities*

\_\_\_\_\_  
*Date*

**FOR BUSINESS OFFICE:**

**AMOUNTS OWING:**

Tuition: \$ \_\_\_\_\_

**30% Deposit Payment:** \$( \_\_\_\_\_ )

Administration Fee: \$ 25.00

**BALANCE DUE:** \$ \_\_\_\_\_ Due: 31 Jan. \_\_\_\_\_ /28 Feb. \_\_\_\_\_  
*(amount) (amount)*

**APPROVED:**

\_\_\_\_\_  
*Business Office Signature*

\_\_\_\_\_  
*Date*

# BERMUDA COLLEGE



## Guarantor Form

Guarantor Forms are being offered to Bermuda College students for Fall and/or Spring terms only, based on the following conditions:

- Guarantor ***must*** be 18 years or older to sign

Term ( <i>tick one</i> ):	<input type="checkbox"/> Fall _____ (year)	<input type="checkbox"/> Spring _____ (year)
Guarantor Name:	_____	
Relationship to Student:	_____	
Address:	_____	
Telephone #s:	_____ (h)	_____ (w) _____ (c)
Email:	_____	Driver's License: _____
<p><i>I agree to pay the amounts owing should _____ default in making their payments. In failing to</i> <i>do so, Bermuda College has the right to send all overdue balances to Bermuda Credit Association (BCA). The guarantor will agree</i> <i>to pay all agency charges, legal cost and other expenses incurred by Bermuda College in attempting to recover overdue amounts.</i></p>		
_____	_____	_____
<i>Guarantor Signature</i>		<i>Date</i>

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**FOR BUSINESS OFFICE:**

**APPROVED:**

\_\_\_\_\_  
*Business Office Signature*

\_\_\_\_\_  
*Date*