



# 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:

- Incidental Fees must be paid up front to initiate the Payment Agreement
- Non-Refundable Administration Fee of \$25 will be charged
- 1<sup>st</sup> monthly payment is due by February 2<sup>nd</sup> and final payment due by March 5<sup>th</sup>, 2021
- **A late fee of \$100 will be added to any balances remaining after March 5<sup>th</sup>, 2021**
- A 'hold' will be placed on student accounts if outstanding balance remains after March 6<sup>th</sup>, 2021
- Bermuda College is a member of the Bermuda Credit Association
- Student **must** be 18 years or older to sign Payment Agreement

Term (tick one):  Fall \_\_\_\_\_ (year)  Spring \_\_\_\_\_ (year)  Summer \_\_\_\_\_ (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% Admission Deposit:** \$ ( ) \_\_\_\_\_

Incidental Fee/Minimum Payment: \$ ( ) \_\_\_\_\_

Administration Fee: \$ 25.00 \_\_\_\_\_

**BALANCE DUE:** \$ \_\_\_\_\_ Due 02 Feb. \_\_\_\_\_ Due 05 Mar. \_\_\_\_\_  
(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)	<input type="checkbox"/> Summer _____ (year)
Guarantor Name:	_____		
Relationship to Student:	_____		
Address:	_____		
Telephone #s:	_____ (h)	_____ (w)	_____ (c)
Email:	_____	Driver's License:	_____
<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>			
_____	_____		_____
<i>Guarantor Signature</i>			<i>Date</i>

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**FOR BUSINESS OFFICE:**

**APPROVED:**

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

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