



LINFIELD CHRISTIAN SCHOOL CREDIT APPLICATION AND AGREEMENT

(Two, Twelve or other Payment Plans)

Student Name _____

Student Name _____

Student Name _____

Student Name _____

This Credit Application and Agreement is between the parent(s) or guardian(s) ("Parent") listed below and Linfield Christian School ("Linfield"). Parent(s) hereby request an extension of credit for the payment of tuition and fees as set forth on the Registration and Enrollment Agreement and further agree to the following terms and conditions:

1. Linfield may verify my/our credit history with Experian Consumer Credit Service.
2. In the event of a negative credit history, or for students on probation (academic or otherwise), Linfield may, at its sole discretion, require Parent to pay tuition in full prior to the start of school.
3. There will be a \$20.00 per month per student service charge for the two, and twelve-payment options.
4. Returned checks/non-sufficient ACH transactions are subject to a \$25 charge in addition to a possible late payment charge. Three returned checks or non-sufficient ACH transactions may result in loss of check/ACH privileges.
5. The undersigned agrees to pay all collection and court costs which may be incurred to collect monies due as a result of the above-referenced student(s) enrollment in Linfield Christian School.

Please provide information for all parties who will be responsible for payment of tuition.

FATHER / MALE GUARDIAN

MOTHER / FEMALE GUARDIAN

Name _____

Name _____

Relationship to Student(s) _____

Relationship to Student(s) _____

Street Address _____

Street Address _____

City, State, Zip _____

City, State, Zip _____

Home Telephone _____

Home Telephone _____

Email Address _____

Email Address _____

Date of Birth _____

Date of Birth _____

Social Security No. _____

Social Security No. _____

Drivers License No. _____

Drivers License No. _____

Employer _____

Employer _____

Name City

Name City

Work Telephone _____

Work Telephone _____

Occupation _____

Occupation _____

Local relative/friend _____

Local relative/friend _____

Not living at same address Name

Not living at same address Name

Street Address, City Telephone

Street Address, City Telephone

Father/Male Guardian Signature Date

Mother/Female Guardian Signature Date