



# MT. VERNON COMMUNITY SCHOOL CORPORATION

Date \_\_\_\_\_  
Parent or Guardian Name \_\_\_\_\_  
Student Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_

- Fortville Elementary
- McCordsville Elementary
- Mt. Comfort Elementary
- Mt. Vernon Middle School
- Mt. Vernon High School

## Re: 2017/18 MVCSC Payment Plan Agreement

This letter confirms the Mt. Vernon Community School Corporation's agreement with the above noted individual, in which they acknowledge their indebtedness to the school corporation as specified below and promise to pay the amount due in monthly, bi-weekly, or weekly installments as follows:

Payment Period:     \_\_/\_\_/\_\_ through \_\_/\_\_/\_\_

Total Amount Due:    \$\_\_\_\_\_.

Payment Schedule:    \_\_\_\_ (\_\_) equal installments of \$\_\_\_\_\_ to be paid:  
                              \_\_ Monthly    \_\_ Bi-Weekly    \_\_ Weekly

with the first payment due \_\_/\_\_/\_\_,  
plus one (1) final payment of  
\$\_\_\_\_\_ due \_\_/\_\_/\_\_.

The payment plan is contingent upon receipt of the signed payment plan agreement and the receipt of the first payment of \$\_\_\_\_\_ due by \_\_\_\_\_, 20\_\_\_. This payment will be applied to the total amount due listed above.

All payments are due on the agreed upon schedule. If at any point a payment is missed or check is returned for any reason by the bank, and the account is considered uncollectable then the total amount of the outstanding balance will be turned over to collections.

\_\_\_\_\_  
Parent or Guardian Print Name

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
MVCSC Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title