



CENTRAL COAST CHILDREN'S CHOIR CHORISTER FINANCIAL INFO FORM

Aug/Sept 2017 - May 2018

Please fill out all information requested below. Please print legibly. Thank you!

SINGER'S NAME: _____

Parent/Guardian #1 Name: _____ **Phone:** _____

Parent/Guardian #1 Address: _____

Parent/Guardian #1 Email Address: _____

Parent/Guardian #2 Name: _____ **Phone:** _____

Parent/Guardian #2 Address: _____

Parent/Guardian #2 Email Address: _____

Which parent is financially responsible for payment of CCCC costs? Both Parent/Guardian #1 Parent/Guardian #2
 Other **If parents are not financially responsible, who is?** _____

Address: _____ **Phone:** _____

Email Address: _____

Please circle your child's choir group and select payment plan for the year:

CHOIR GROUP	1-Payment Plan Due w/ Registration	2-Payment Plan Due w/ Registration & Jan 10th	3-Payment Plan Due w/ Registration, Jan 10th & Mar 10th
<i>Debut</i>	\$500	2 x \$262	3 x \$185
<i>Apprentice</i>	\$600	2 x \$312	3 x \$220
<i>Young Men's Ensemble</i>	\$700	2 x \$362	3 x \$250
<i>Premiere</i>	\$700	2 x \$362	3 x \$250
<i>Concert</i>	\$800	2 x \$412	3 x \$285
<i>AVE</i>	\$925	2 x \$475	3 x \$325

For the 2- and 3-Payment Plans, you must supply a credit or debit card number below. No cash/checks.

AVE price includes tuition for Concert Choir. Bounced check fees will be billed to Parent.

TUITION

Tuition (As per selection above - due at time of registration) + _____

Sibling Discount (\$50 discount for each chorister) - _____

\$150 Volunteer fee per family + _____
 (optional to pay in lieu of volunteering 10 hours during the year)

TOTAL = _____

Amount paid today _____

Method of Payment:

- Cash** (please put in clearly marked envelope with name)
- Check** payable to CCCC (Ck # _____ Date received _____)
- Credit/Debit Card** (Visa/MC/Discover/AMEX) Card # _____ Exp _____
 Name on Card _____ 3-digit Security Code _____

I authorize CCCC to initiate electronic payments for the selected payment plan to my credit/debit card account.

Signature: _____

Scholarships available based on financial need – please ask staff for an application.

FOR OFFICE USE ONLY: COPIES TO Finance Manager Parent

8-2-17