



*The Aquatic Center provides payment plans for semester fees for those that cannot afford to pay for the full amount of semester fees when due. Please fill out all portions of agreement and return to the Front Office.*

Agreement made for the Capital COVID training program fees is made on this \_\_\_\_\_ day of \_\_\_\_\_, 2021.

Between: \_\_\_\_\_ (Parent/guardian name) for \_\_\_\_\_ (athlete/participant)

and the Sacramento State Aquatic Center (hereinafter referred to as "SAC".) Parent/Guardian and SAC have entered into this payment plan agreement for the Capital COVID Training program dates for the Spring Session #1 January 11 – March 12, 2021.

**Terms and conditions:**

1. Parent/Guardian acknowledges being indebted to SAC for \$475.00 for Capital COVID Training Program.
2. Parent/Guardian shall pay using the payment schedule below by order of Electronic Funds Transfer (EFT) on the required day by a credit card of a Visa or MasterCard.
3. Parent/Guardian understands that all fees must be paid with the same VISA or MasterCard.
4. If parent/guardian fails to make payment (i.e. declined payment) parent/guardian must make payment within two days. After two days athlete will no longer be allowed to practice until the outstanding balance is made.
5. This agreement form and first payment of \$250.00 must be paid turned into the SAC by Friday, January 15, 2021.
6. Balance must be paid in full by February 19, 2021.
7. Outstanding fees after February 19, 2021 may be subject to a \$50.00 late fee.
8. Parent/Guardian agrees that if credit card is lost or stolen they will submit a new credit card payment form before the next payment is due.
9. Parent/Guardian agrees that in the event that the athlete no longer participates in Capital Crew, they are still liable for all payments.
10. Parent/Guardian acknowledges that this agreement is only for the Spring Session #1 for January 11 – March 12, 2021. Parent/Guardian will be required to submit another form for the Spring Session #2 if they choose to enroll in that payment plan agreement.
- 11. Capital COVID training program fees are non-refundable and non-transferable.**
12. Parent/Guardian has read this agreement and understands its terms.

**Payment Schedule:**

Payment Numbers	Reminder Date:	Payment Date:	Monthly Charge:
#1	Payment will be charged when form is turned in		\$250.00
#2	02/15/2021	02/19/2021	\$225.00

The undersigned has read and agrees to be bound by this agreement, the terms and conditions, payment schedule and credit card payment form. Parent/Guardian represents athlete and has sufficient power, authority and capacity to bind this agreement with their signature.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: Parent/Guardian: \_\_\_\_\_ Athlete: \_\_\_\_\_

Aquatic Center Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**Credit Card Authorization Form**

Parent/Guardian Name: \_\_\_\_\_

Athletes Name: \_\_\_\_\_ Squad: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Parent/Guardian has signed an agreement with the Sacramento State Aquatic Center to charge this credit card on the dates listed below for the Capital COVID Training Program. Parent/Guardian will see the charges listed as Associated Students, Inc.

**Parent/Guardian agrees that in the event the athlete no longer participates in the Capital COVID Training Program, they are still liable for all payments and the payment schedule will still be charged.**

**All Capital Crew program fees are non-refundable and non-transferable.**

Parent/guardian understands that this credit card authorization form must be submitted to the SAC front office in person or thru fax and CANNOT be accepted thru email.

Payment Schedule:

Payment Numbers	Reminder Date:	Payment Date:	Monthly Charge:
#1	Payment will be charged when form is turned in		\$250.00
#2	02/15/2021	02/19/2021	\$225.00

VISA/MasterCard # \_\_\_\_\_

Expiration Date: Month: \_\_\_\_\_ Year: \_\_\_\_\_ CVC # \_\_\_\_\_

*(I verify that the expiration date is after February 2021 \_\_\_\_\_ initial)*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_