

# Payment Plan Agreement FALL 2017

## Forms must be returned by September 8th, 2017 to avoid late fees

All of the terms and conditions of your MIAD Payment Plan Agreement (the "PPA") are incorporated herein and continue in effect. Please refer to the Payment Plan Disclosure Document for other terms and conditions. To enroll in the MIAD PPA, a signed agreement must be returned to the Student Accounts Office, RL10. It is highly recommended that you contact the Student Accounts office to verify your Statement Balance and confirm that there are no additional charges or adjustments to your account before completing this form.

STEP ONE: Choose a Payment Option		
<del></del>	ents by check, cash, or credit card on the prede	·
Two. Under this option, I understand that I will be		th. If you select this method, add a
Set-Up Fee of \$50 to the total Amount Due shows	n on your statement.	
My Statement Balance is	+ a \$50 Set-Up Fee =	Total PPA Amount
	ically deduct monthly payments on the predet	•
Under this method, payment will automatically be	deducted from a bank account or charged to	a credit card. <b>There is no Set-Up Fee</b>
if you select this option.		
My Statement Balance and PPA Amount i	S	
If you have selected Option 2, please fill out t	he MIAD Recurring Payment Authorization fo	rm and return it with the signed
	Payment Plan Agreement.	
STEP TWO: Select a PPA installment due date from	m one of the two schedules. Please note that	students can still enroll in payment
plans after September 8th, but late fees will apply	<u>.</u>	
I wish to make payments on the 1st busine	ess day of the month. MIAD will calculate my i	monthly amount due by dividing the
total PPA Amount shown in Step One by the numb	er of months remaining in the Fall Semester.	MIAD will mail a notice listing the
exact payment dates and payment amounts before	e my first payment is due. This notice will be r	nailed to the address listed on my
Student Account.		
For a 5-month payment plan (August – De	ecember), this form must be returned no later	than July 26 <sup>th</sup> , 2017.
For a 4-month payment plan (September	– December), this form must be returned no la	ater than August 28 <sup>th</sup> , 2017.
I wish to make payments on the 15 <sup>th</sup> busi	ness day of the month. MIAD will calculate my	monthly amount due by dividing
the total PPA Amount shown in Step One by the ne	umber of months remaining in the Fall Semest	er. MIAD will mail a notice listing the
exact payment dates and payment amounts before	e my first payment is due. This notice will be r	mailed to the address listed on my
Student Account.	•	·
For a 5-month payment plan (August – De	ecember), this form must be returned no later	than August 9th, 2017.

For a 4-month payment plan (September – December), this form must be returned no later than September 11<sup>th</sup>, 2017.

#### STEP THREE: SIGNATURE AND ACKNOWLDGEMENT OF ADDITIONAL TERMS

#### **Changes to my Statement Balance**

If there are any changes to my student account resulting in additional charges, I am responsible for paying the additional amount due upon receipt of my next monthly statement, or 30 days after the date said changes are made to my account. Once this PPA is signed and returned to the Student Accounts office, the PPA Amount Due and the monthly payment amounts cannot be increased without written consent of the Student and, if different, the bank account holder.

If there are any changes to my student account resulting in a reduction of charges, MIAD will automatically reduce the last payment(s) amount.

### **Returned Payments**

A \$15 Returned Payment Fee will be added to my account for any check or automatic withdrawal that is returned by my bank for any reason (NSF, account closed, etc.).

#### **Late Payment Penalty**

If I fail to make my monthly payment, a late charge of \$25.00 per missed payment will be added to my account. MIAD will provide a 10-day grace period before the late penalty will apply.

By signing below, I agree to make the payments in the amounts and on the dates specified above. I have read the additional disclosures listed above and agree to all terms of the Payment Plan Agreement.

I am aware of and have read the Truth in Lending Act and Billing Rights disclosures that are found on the MIAD website at http://www.miad.edu/financial-aid/cost-tuition-fees/the-billing-and-payment-process
MIAD will also mail a hard copy of these disclosures to the address listed on my Student Account.

The Amount Due may be paid at any time in advance of the payment dates scheduled above at no penalty.

STUDENT NAME (Printed) :
STUDENT SIGNATURE:
STUDENT ID:
DATE: