



## **PAYMENT PLAN REQUEST**

Surname:

Email address:

Total payment amount:

Which payment schedule suits best: (please circle)

- Weekly
- Fortnightly

Amount you prefer to pay each instalment:

An invoice will be emailed to you on the Monday of the week the payment is due with the amount payable.

Please sign below to agree to the payment plan conditions.

Name:

Signature:

Date:

If you have an issue with payments, please do not hesitate to contact me to discuss further options.

Amanda Barton 0499 840 166 or email  
[newenglandathleticstraining@gmail.com](mailto:newenglandathleticstraining@gmail.com)