



**T2T Tutoring Program**  
Payment Plan Authorization Form

**Today's Date:** \_\_\_\_\_

**Student Name(s):** \_\_\_\_\_

**1. Payment Plan Options:**

*Fees may be paid in full or monthly on the 1<sup>st</sup> of each month*

**10-Hour Package:** \$675 (2 payments of \$337.50, billed every 5 sessions)

**20-Hour Package:** \$1,200 (4 payments of \$300, billed every 5 sessions)

*Late Fees I understand that a late fee of \$10 per session will be added to any unpaid balances starting from the 6th session.*

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

Parent/Legal Guardian Signature: \_\_\_\_\_

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

**2. Auto Debit/Credit Card:**

Full Name on Card: \_\_\_\_\_

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

City / Town: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

Debit / Credit Card # \_\_\_\_\_ Exp: \_\_\_\_\_ CVV \_\_\_\_\_

***Credit Card Authorization***

*I authorize a recurring charge to my card on file based on my selected package:*

**10-Hour Package:** A charge of \$337.50 due before the 6th session.

**20-Hour Package:** A charge of \$300 due before each new 5-hour block (Sessions 6, 11, and 16)

*I understand that these charges will be processed automatically upon the completion of the milestone session.*

Parent/Legal Guardian Signature: \_\_\_\_\_

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