

**Yarmouth Community Services
200 Main Street
Yarmouth, ME 04096**

Installment Plan Policy

Agreement

We are pleased to be able to offer an installment plan in order to help accommodate our participants and insure that all Yarmouth citizens can enroll and participate in our Community Services programs.

Name: _____ Phone: _____ Date: _____

Address: _____ Email: _____

1. Payment must be received in full by date(s) indicated below. Full payment must be made within **four** months.
2. Payments must be paid on a monthly basis unless otherwise stated.
3. If you must drop a program, please notify Community Services prior to the starting date. A refund will be issued. If you drop after the first class or program date, you must contact Community Services prior to the second session or class meeting to receive a 50% refund less a \$5.00 handling fee. **No refunds will be issued after the second class meeting/session. Participants will be responsible for the remainder of the payments if Community Services is not notified of cancellations.**
4. New Installment Plan enrollments from the same household will not be accepted for subsequent programs if account balances are not paid in full according to this agreement. The Town of Yarmouth reserves all rights for collection and recovery of delinquent accounts.
5. No interest will be charged on accounts paid under the terms of this agreement. A one time processing fee of \$10.00 will apply to all Installment Plan accounts. Interest on delinquent accounts will accrue at 1% per month on all outstanding balances after the due date.
6. Every applicant must provide a valid credit card number, and **authorize YCS to charge to that account**, should their account not be paid in full **four** months from the agreement date.

Payment Schedule

Registration Subtotal	Processing Fee	Total Due	Initial Payment (25%)	Balance Due
	\$10.00			

Monthly Payment _____

Due Date _____

Monthly Payment _____

Due Date _____

Monthly Payment _____

Due Date _____

The undersigned agrees to the above terms and conditions for Installment Plan registration in Yarmouth Community Services programs. In addition, the undersigned has provided, and authorizes YCS to charge, a valid credit card to be used in the case that the account becomes delinquent (not paid within 4 months of the agreement date).

Credit Card # _____

Exp. Date _____

Applicant signature _____

Date _____

YCS signature _____

Date _____

Automatic Payment Option

____ Check here to
authorize automatic
monthly credit card
payment.