

Cleveland Institute of Music Payment Plan Enrollment Form

Fall 2010

The Cleveland Institute of Music 4-Month Payment Plan

Please Note: The enclosed statement is only an estimate of your costs for the fall semester. Final bills will not be available until after the drop/add period on September 3, 2010.

The Cleveland Institute of Music offers students the option to meet their financial responsibility through a 4-month payment plan.

There is a non-refundable \$25.00 set-up fee per semester for the plan which is due with the first payment of each semester.

Note that payment plan amounts are **not** adjustable due to miscalculation errors. Additional fees incurred during the semester are due and payable upon receipt. CIM reserves the right to terminate any account for non-compliance with payment deadlines whereby the unpaid balance for the semester becomes due and payable to CIM immediately.

The payment due dates for Fall Semester 2010 are as follows:

- **August 9, 2010***
- September 9, 2010
- October 9, 2010
- November 9, 2010

Final payments are due November 9, 2010 and failure to have your bill paid in full by this date may result in semester grades being withheld, a hold placed on your account which will not allow you to register for next semester. All financial obligations must be met prior to commencement. Final transcripts and diplomas will be withheld until the outstanding balance is paid in full.

Payments may be made by cash, check, or wire. Checks should be made payable to: The Cleveland Institute of Music. Please include student ID and student name with all check and wire payments.

*** Remember to include the \$25 set-up fee with your initial payment.**

Return bottom portion with initial payment

By signing and returning this portion you agree to pay your financial responsibility to The Cleveland Institute of Music in 4 equal installments for Fall Semester 2010 on or before the dates indicated above.

_____	_____	Total amount due:
Student ID	Student Name	_____
		Divide by 4
		Monthly payment**:
_____	_____	_____
Amount Paid	Parent/Student Signature	