



1415 Beechtree St., Grand Haven, MI 49417

Phone: 616.850.5125

www.norarec.org

NORA Recreation Summer School 2020 Payment Plan Agreement

I, _____, do hereby agree to the following payment plan for Recreation Summer School. I authorize NORA to charge my credit card on dates listed below.

*Registration Fee: \$150
Scholarship Given: -\$75*

Initial Payment : \$25	pd on _____
2nd Payment: \$25	7/17/2020
Final Payment: \$25	8/7/2020

Credit Card required to register with payment plan.

Card #: _____ Security #: _ _ _

Name on Card: _____

Billing Address: _____

Signature: _____