

TuitionPay Monthly Plan Enrollment Form

Enrollment #902365181

Enrolling is as easy as 1-2-3. Or, enroll over the phone: (800) 635-0120.

Student's name (Last, First) _____ Circle one: Male Female

Anticipated college graduation year _____ Student's Social Security # _____ - _____ - _____

Bill payer's name: Dr./Mr./Ms./Mrs. _____ Date of birth ____/____/____

Address _____

City _____ State _____ Zip/Postal code _____

Country _____ E-mail _____

Bill payer's signature _____ Phone (_____) _____

Your fall semester amount will be \$ _____ Your spring semester amount will be \$ _____

(See Step 3 on page 11 of the You're In)

Your enrollment fee due: \$60 (This fee is nonrefundable.)

Your monthly payment due: \$ _____

+

Your enrollment fee due: \$ _____

Total amount enclosed: \$ _____

If TuitionPay receives your enrollment form:	Payment due:
	<i>Payments are due on the 1st of each month</i>
Before 7/1 (10-pay plan)	Fee only
7/2 – 8/1 (9-pay plan)	Fee & one month's payment
8/2 – 9/1 (8-pay plan)	Fee & two months' payments

Payment method:

You may pay by check, money order, or credit card. (Make check or money order payable to Bank of America. See reverse side for automatic withdrawal option.)

Visa Cardholder's name _____ Exp. date _____

MasterCard Card number _____

Cardholder's credit card billing address _____

City _____ State _____ Zip _____

Cardholder's signature _____

Mail your payment and this form to:

TuitionPay, One AMS Place, P.O. Box 991, Swansea, MA 02777

If you have any questions regarding the TuitionPay Monthly Plan, call (800) 635-0120, or visit www.TuitionPay.com.

TuitionPay Monthly Plan Terms and Conditions

To establish your TuitionPay Monthly Plan account, you must send your completed enrollment form, enrollment fee and any monthly payments due on or before the Plan's deadline. Academic Management Services (AMS) administers your Plan according to terms established by your school. Your school may request modifications to your Plan amount as part of its overall billing process. If your account is canceled or terminated, you must still fulfill your financial obligations to the school. AMS is obligated to forward to your school only those payments it has received from you. The \$60 enrollment fee is nonrefundable; all other refunds are made according to the school's refund policy. There are no interest charges with the TuitionPay Monthly Plan. AMS will assess an additional charge if a check is not honored by your bank. To encourage timely payments, a late fee may be assessed.

AMS provides life insurance to persons under the age of 66 to cover remaining tuition payments in the event that the bill payer dies. Your certificate of insurance will note the full details and specifications of your Tuition Protection Coverage.

I understand and agree to the above Terms and Conditions.

If you enroll in TuitionPay, please understand that you must also enroll in the RPI eBill product as well to receive monthly billing invoices from the Bursar's Office at Rensselaer.

Signature of Payer

Date

Enrollment by telephone constitutes your acceptance of these terms and conditions.

Automatic Payment Authorization **(complete this form only if you will be using the Automatic Withdrawal Option)**

If you choose to have your monthly payments automatically deducted from your checking or savings account on your Plan's due date, please follow these easy steps. **This agreement cannot begin unless this COMPLETED form is returned. You will be notified by mail when automatic withdrawals begin. Until you receive notification that the automatic payment withdrawal has begun, payment by check is necessary.**

Step 1: Complete the form below. Be sure to include your signature and date. **Step 2:** If you choose to have your payments deducted from your checking account, you must attach a VOIDED CHECK, NOT A DEPOSIT SLIP, for the checking account you wish to debit. It is used to verify bank account and Electronic Funds Transfer number only. If you choose to have your payments deducted from your savings account, please verify the account and ABA/Routing number with your bank. Passbook Savings Accounts are not eligible for this service. **Step 3:** If the selected account is in a name other than yours, or is a joint account, you must include the name of the other party and his/her signature.

I (We) authorize Academic Management Services to initiate debit entries to the account listed below in order to pay my (our) monthly tuition payments. I understand that, given reasonable notice, this agreement can be terminated by written notification to the financial institution and AMS.

U.S. Bank Account Withdrawal (Must be an ACH participant and a U.S. bank)

_____ Checking Account _____ Savings Account

ABA Routing Number _____ Account Number _____

Name of Financial Institution _____ City _____ State _____

Account Holder Name(s) (Print) _____

Signature _____ Date _____

Signature _____ Date _____