

# Payment Plan Summary



*Epidermal Cell Therapy*

Student: Madison Mauldin

Program: Esthetics Cost: 8700

Payment Schedule Options: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Other

Pay Weekly/Monthly/Other (if other specify): in full

\$50 Application Fee paid:        \$50 Deposit paid:       

Promotions: \$8000.00

CC Beginning Balance: \$8000.00 Payment Amount: \$8000.00

Payment 1: Due: 11/28/22 Paid:        Balance: \$0

Payment 2: Due:        Paid:        Balance: \$      

Payment 3: Due:        Paid:        Balance: \$      

Payment 4: Due:        Paid:        Balance: \$      

Payment 5: Due:        Paid:        Balance: \$      

Payment 6: Due:        Paid:        Balance: \$      

Payment 7: Due:        Paid:        Balance: \$      

Payment 8: Due:        Paid:        Balance: \$      

Payment 9: Due:        Paid:        Balance: \$      

Payment 10: Due:        Paid:        Balance: \$      

Payment 11: Due:        Paid:        Balance: \$      

Payment 12: Due:        Paid:        Balance: \$      

Payment 13: Due:        Paid:        Balance: \$      

Payment 14: Due:        Paid:        Balance: \$      

Payment 15: Due:        Paid:        Balance: \$      

Payment 16: Due:        Paid:        Balance: \$      

Payment 17: Due:        Paid:        Balance: \$      

Payment 18: Due:        Paid:        Balance: \$      

Payment 19: Due:        Paid:        Balance: \$      

Payment 20: Due:        Paid:        Balance: \$      

Payment 21: Due:        Paid:        Balance: \$      

Payment 22: Due:        Paid:        Balance: \$      

Payment 23: Due:        Paid:        Balance: \$      

Payment 24: Due:        Paid:        Balance: \$      

Payment 25: Due:        Paid:        Balance: \$      

Payment 26: Due:        Paid:        Balance: \$      

Payment 27: Due:        Paid:        Balance: \$      

Payment 28: Due:        Paid:        Balance: \$      

Payment 29: Due:        Paid:        Balance: \$      

Payment 30: Due:        Paid:        Balance: \$      

Payment 31: Due:        Paid:        Balance: \$      

Payment 32: Due:        Paid:        Balance: \$      

Payment 33: Due:        Paid:        Balance: \$      

Payment 34: Due:        Paid:        Balance: \$      

Payment 35: Due:        Paid:        Balance: \$      

Payment 36: Due:        Paid:        Balance: \$      

Payment can be made directly to The Institute Monday-Wednesday or on your agreed payment day and time 8:30am-9:00am. Payments can also be mailed to The Institute of Epidermal Cell Therapy, 445 N. Battlefield Blvd., Chesapeake, Virginia 23320. The Institute does not accept cash payments over \$200.00. A charge of 4% is applied to all credit card payments. Students will be charged \$30.00 for all returned checks.

Payments must be remitted by scheduled date, or student will not be permitted to attend class until payment has been made. Student agrees to pay \$15.00 per hour for any additional make up hours required to successfully complete his or her program. Student agrees to a charge of \$20.00 per hour when exceeding 20 hours. Student agrees certificate of completion will not be released until all payments received.

I, the undersigned student, have received a copy of this contract and hereby agree to all terms and conditions set forth.

Student Signature: Madison Mauldin Date: 11/28/22

Administrator Signature: Debra Watkins Date: 11/28/22