

**IMG ACADEMIES TUITION DEPOSIT AGREEMENT
2010-2011**

I, _____ confirm the enrollment of my _____
Name of Parent/Guardian Name of Student/Athlete

In the following program: Sport: _____ Standard Student Housing Non-Boarding

Full-Time Junior Program Post Grad Program Semester 1 Semester 2 All Year (Aug. 28 – June 4)

Academic School Attending Pendleton School St. Stephen's School UM Other _____ Grade _____

UPGRADED HOUSING OPTIONS

- Academy Park Villas, Private Bedroom Private Bath
- Academy Park Villas, Shared Bedroom or Shared Bath
- Champions Walk Private Unit 1-Bedroom, 1 Bath
- Champions Walk Private Bedroom/1 Bath (Private Bedroom, Shared Bath)

UPGRADED MEAL PLANS OPTIONS

- Upgraded Meals Boarding - Breakfast, Lunch, Dinner
- Upgraded Meals Non-Boarding, Lunch Only

Please initial choice of enrollment option.

- ___ I am enrolling my child for the 10/11 full-time year and agree to pay the full time sport tuition balance by 8/1/2010.
- ___ I am enrolling my child in the 10/11 full-time year and agree to pay by the installment plan option described on 10/11 rate card
- ___ I am enrolling my child for Semester 1 only of the 10/11 full-time year and agree to pay the tuition balance by 8/1/2010.
- ___ I am enrolling my child for Semester 2 only of the 10/11 full-time year and agree to pay the tuition balance by 12/1/2010.

I agree to pay the non-refundable \$4,000 tuition deposit as indicated below:

Parent/guardian hereby understands the following: (A) the \$4,000 deposit is non-refundable except if (1) participant is not accepted (2) international student is unable to obtain a visa or (3) a qualified and licensed medical practitioner does not give participant unrestricted clearance to participate. Deposit minus \$200 processing fee plus any other payments made to and actually received by Academies shall be returned to Participant and his/her parent/guardian. (B) Tuition balances and fees must be made via bank wire transfer, check drawn on a US bank or cash.

Enclosed Check # _____

Wire Transfer* Cash** Visa Master Card American Express Diners Club

Credit Card #: _____ Exact Name on Card: _____

Expiration Date: _____ "V" Code: _____

Signature required regardless of form of payment: _____

* Please attach copy of wire transfer receipt
**Payment by cash available only in person

Note: Deposit agreement only considered complete when deposit received by IMG.



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