

FINANCIAL AGREEMENT WITH RIDE WITH PRIDE OF VA

Dated: _____

Program Session (Please circle one): Spring Summer Fall

Student Name: _____

Student Address: _____

Party responsible for payment: _____

Name of Contact person (if other than parent) _____

Address of above person: _____

Phone number: _____

PO Number if applicable: _____

Parent/Guardian of student: _____

Mailing address of parent: _____

Phone number of parent: Home: _____ work: _____ cell: _____

This letter forms an agreement with Ride with Pride of VA and the Party responsible for payment. The Party responsible for payment also understands that Ride with Pride is not responsible for making up any unattended lessons. Ride with Pride may make up lessons that are canceled in advance and will provide one make up lesson at the end of every session. Clients are responsible for attending any and all scheduled lessons and may not be reimbursed unless deemed so by the Program Director due to extenuating circumstances. The party agrees to pay \$_____ for the _____ session that lasts _____ weeks. Payment must be made before the final day of the ridding session. Invoices will be sent out 3 weeks into the session if payment has not yet been received. All balances must be paid in full by the end of the scheduled session, unless different arrangements have been made with the Program Director and Treasurer in writing.

I, (parent/guardian) _____ of student _____ agree that if the above person responsible for payment does not pay within 30 days of invoicing, will be responsible and pay for any and all unpaid balances upon notification.

Party responsible for payment _____

Parent/Guardian signature _____

Ride With Pride Program Director _____

Date: _____