



MONTE ALLEN KARATE

543 Third Avenue, Brooklyn, NY 11215 • 718-965-8410

Web: www.monteallenkarate.com • E-mail: monteallenkarate@aol.com



REVISED TUITION PRICING

Tuition pricing policies beginning **March 1, 2008:**

ADULTS

Pay-by-month	.....	\$120
Pay-by-month Late Fee	.....	\$10
Direct Payment Rate	.....	\$115

CHILDREN

Pay-by-month	.....	\$95
Pay-by-month Late Fee	.....	\$10
Direct Payment Rate	.....	\$90

NEW STUDENTS

First Class	.....	FREE
Pay-per-class	.....	\$.15/class (up to one month only)
Direct Payment (3 mo. minimum)	.....	Direct Pay rate + free Gi
Direct Payment (6 mo. minimum)	.....	Direct Pay rate + free Gi + free Basics Book

ADDITIONAL POLICY CLARIFICATIONS

Pay-by-month Students MUST submit payment by the first of the month. *Payments made later than the 1st of the month will incur a late fee.*

Direct Payment Students will have their credit card accounts billed on the first of each month. A *Credit Card Consent Form* will be kept on file.

New students joining up after the 15th of the month may pay half for the first month, so long as they pay for a complete second month at the same time.

All Students' enrollment at Brooklyn Kenshikai is on-going. A student must notify Shihan Monte Allen by the 15th of the prior month if (s)he will go inactive. Otherwise, the student will owe tuition (and any applicable late fees) for the new month. New Students enrolled under the 3 or 6 Month Minimum Direct Payment option cannot go inactive until the minimum period is up.



MONTE ALLEN KARATE

543 Third Avenue, Brooklyn, NY 11215 • 718-965-8410

Web: www.monteallenkarate.com • E-mail: monteallenkarate@aol.com



DIRECT PAYMENT CREDIT CARD CONSENT FORM

I, _____,

hereby give Monte Allen Karate of Brooklyn, NY permission to charge my

VISA

Mastercard

American Express

Account No: _____,

Expiration date: _____,

3-digit security code: _____,

on the first of each month, beginning ____ / ____ / 2008 for tuition for the following students enrolled at the school:

1. _____,

2. _____,

3. _____,

I affirm my understanding that by participating in this "direct payment" option, I will save \$5 on each student's monthly tuition. Moreover, I affirm that I will give 15 days notice to opt out of the following month's payment.

I am aware of my responsibility to pay in full the amount mentioned above and I also agree to perform other obligations set forth in the cardholder's agreement with the issuer. Therefore, this form can be a replacement of signed or imprinted mag swipe read.

Signature of Cardholder: _____

Date ____ / ____ / 2008