



EDUCATION PAYMENT AGREEMENT

I, _____ agree to make payments to Live Theatre Workshop towards the Education Program for which my child _____ is attending, for the term of _____. A total of \$_____ will be paid in full by _____.

I will be making _____ payments.

_____ 2
_____ 4
_____ 6

If for any reason you are unable to make the full amount owed by the date agreed upon, all participants will be ineligible to take classes until the entire balance is paid in full.

By signing this agreement, all parties agree to the terms as described above. Alterations to this agreement can only be made by both parties and must be placed in writing. Both parties will receive a printed copy of this agreement, and will be responsible for upholding its terms.

Signature of Responsible Party

Date

Signature of Education Administration

Date