North Layton Jr High School

1100 W Antelope Dr. Layton, UT 84041 801-402-6600

PAY PLAN AUTHORIZATION FORM

STUDENT NAME:		_GRADE:	STUDENT#	
PARENT/GUARDIAN NAME	: <u></u>			
ADDRESS:		_ CITY:	ZIP CODE:	
HOME PHONE:	CELL PHONE: _		WORK PHONE:	
EMPLOYER:				
AMOUNT DUE:	DEPOSIT:			
EMERGENCY CONTACT (NO	DT CURRENTLY RESIDING WITH YO	OU) INCLUDIN	G A NAME AND PHONE NUMBERS:	
DESCRIPTION OF FEES/FIN	ES OWED TO NORTH LAYTON JR:			
	PAYMENT DATE(S):		PAYMENT AMOUNT(S):	
I DEFAULT, MY ACCOUNT A ACCOUNTS WILL BE CHARG UNDERSIGNED AGREES TO COLLECT THE UNPAID BALA IN ADDITION TO THE COLL NUMBER WE REASONABLY LAWFUL PURPOSES. YOU A	WILL BE SENT TO BONNEVILLE CO GED INTEREST RATE (18% PER AN PAY A COLLECTION FEE NOT TO I ANCE, THE UNDERSIGNED FURTH ECTION FEE. YOU ARE AUTHORIZI (BELIEVE WE CAN CONTACT YOU AGREE TO ANY FEE(S) OR CHARGE	LLECTIONS FC NUM). IN THE EXCEED 40% C ER AGREESS T NG US TO CA , INCLUDING (S) THAT YOU	TH LAYTON JUNIOR HIGH SCHOOL. I U OR COLLECTION OF THE ABOVE FEES. A EVENT ANY BALANCE IS NOT PAID AS OF THE UNPAID BALANCE. IN THE EVE TO PAY COURT COSTS AND REASONAB LL YOU AT ANY NUMBER YOU PROVID CALLS TO MOBILE, CELLULAR OR SIMI MAY INCUR FOR INCOMING CALLS FF NUMBER, WITHOUT REIMBURSEMEN	ALL DELINQENT 5 AGREED, THE NT OF A LAWSUIT TO 5LE ATTORNEY'S FEES 5E OR AT ANY LAR DEVICES FOR ANY ROM NORTH LAYTON
PARENT/GUARDIAN SIGNATURE:			DATE:	
PRINCIPAL'S SIGNATURE OF APPROVAL:			DATE:	