

☐ Central Campus ☐ East Campus ☐ FSU Campus
☐ High School ☐ West Campus ☐ _____



Student's Name: _____
(Last) (First)
Grade: _____ School Year: **2016-2017**

Payment Agreement

Currently, payment is accepted in Cash, Check and Credit Card. Please make all checks payable to: **City of Pembroke Pines.**

Any check issued to the City that is returned by the bank for: (insufficient funds, account closed, stop payment, refer to maker, no account found or other) will be assessed a returned check fee as provided for in § 166.251, Florida Statutes, as amended from time to time. § 166.251, Florida Statutes, provides for the following fees:

\$25.00 if the check face value does not exceed \$50.00
\$30.00 if the check face value exceeds \$50.00 but does not exceed \$300.00
\$40.00 if the check face value exceeds \$300.00 or
(5%) of the check face amount of the check whichever is greater.

In the event a dishonored check is not paid, in accordance with Chapter § 166.251, Florida Statutes, appropriate legal action may be filed for the full amount of the returned checks due and owing together with services charges, court costs, and reasonable attorney fees as provided by law.

When a customer is issued three (3) returned checks on any City account during the most recent twelve (12) months, his/her check payment privileges at The City of Pembroke Pines will be suspended for a period of six (6) months.

Subsequent returned checks received after the reinstatement of check writing privileges, will result in additional six (6) months suspensions.

Payment to satisfy a returned check will only be accepted by the City and may result in any or all of the following:

Furthermore, dishonored checks not reimbursed to the City or any outstanding monies owed may result in any or all of the following:

- ⌚ Students will be denied participation in extra curriculum activities such as field trips, prom, graduation ceremony, grad night, homecoming, sporting events, parking privileges, or any other privilege at the school.
- ⌚ Records and/or transcripts will be withheld until all outstanding monies owed are paid.
- ⌚ **BEFORECARE/AFTERCARE:** Past due accounts without satisfactory arrangements with the Site Supervisor shall result in your child not being able to attend the program until your account is brought current.

Policies for The City of Pembroke Pines programs are subject to change.

Parent or guardian: By signing this agreement, I (we) agree to pay all amounts when due under this agreement. I have read and received a copy of this agreement and agree to all of its

MOTHER OR GUARDIAN

NAME: _____
DRIVER'S LIC #: _____
SIGNATURE: _____
DATE: _____

FATHER OR GUARDIAN

NAME: _____
DRIVER'S LIC #: _____
SIGNATURE: _____
DATE: _____