Vista Del Mar - Jewish Life Programs Payment Authorization 2024-25 School Year

NOTE: REGISTRATION IS NOT VALID UNTIL THE BELOW IS COMPLETED, SIGNED AND RECEIVED.

'd like to enroll			for the	for the 2024-2025 Nes Gadol Program.		
outlined below. agreed payment	I hereby authorize Vis plan. I understand t	sta Del Mar to ch that if for any rea	arge the bel	opt for the term paym ow credit card as indic low payment does no at term has been mad	cated in the below ot go through,	
Nes Gadol Total	Cost: \$1,200.00					
 Payment 	1: September13, 202 2: January 2, 2025 - \$ 3: April 2, 2025 - \$40	\$400.00				
Credit Card Au	ıthorization					
Please charge my cro	edit card for the deposit/fe	ee of				
in the amount of:						
OVISA	OMASTERCARD	OAMERICAN EX	(PRESS			
Card #			_ EXP. Date	<i></i>		
Signature						
Name						
Address _			_			
City		ST	ZIP			

For special consideration due to financial hardship, please contact Rabbi Jackie Redner 310.836.1223 x209. We will always work with your family and want you involved.