



**If an organization will be paying for your student(s), please provide all contact information:**

Name of Organization: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

The school agrees to give a 500 NIS early-payment discount per student per semester to parents/guardians who pay their students' fees privately (i.e., not paid/reimbursed by an employer), at the full rate under options 1 or 2, and who make their payments prior to the payment deadlines.

The parent(s) agree that late payments under any of the categories will be subject to a surcharge of 1% of the amount due for each month for which the payment is outstanding.

The conditions are agreed to between the school and the parent(s).

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Parent's/Guardian's Signature

Date

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Parent's/Guardian's Signature

Date

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Finance Manager's Signature

School Stamp

Date

*Please complete, sign and return this agreement with your first payment, Application Fee and/or (Re)Enrolment Deposit to the AISJ Finance Office.*