



Fall 2024 OR Winter 2025 INSTALLMENT PAYMENT PLAN ONE TERM AGREEMENT

I, _____, have opted for the installment payment plan to pay my accommodation and other fees, as outlined in my Accommodation Agreement.

I **AGREE TO PAY** all installment payments by the required due dates noted below via any payment method accepted by the Registrar’s Office.

Fall 2024 (August 31, 2024-Dec 22.24’) OR Winter 2025 (Jan 5’25-Apr 24’25) Term

Installment Due Dates: Fall Winter	1st TBD Dec 1/2024	2nd Oct 1/2024 Feb 1/2025	3rd Nov 1/2024 March 1/2025	Total
4 bedroom unit	1,767.50	826.25	826.25	3,420.00
2 bedroom unit	1,841.50	863.25	863.25	3,568.00

1st installment includes: 50% of the accommodation fees for one semester + \$40 residence programming fee + an installment payment plan administration fee of \$75.

2nd installment includes: 25% of the accommodation fees for one semester.

3rd installment includes: 25% of the accommodation fees for one semester

FURTHER, I AGREE TO AND UNDERSTAND THE FOLLOWING TERMS:

- A non-refundable installment plan administration fee of \$75.00 will be added to my account upon signing this agreement.
- As per my Accommodation Agreement, I am responsible for payment of the full accommodation fee outlined in the Agreement.
- Failure to abide by the conditions outlined in this installment agreement:
 - May result in sanctions imposed under the Residence Policies, Procedures and Conduct Guide. _____
 - Will result in a late fee of \$25 if payment is not RECEIVED BY the due date. _____
 - Will result in loss of access to the unit if payment is not RECEIVED within 7 calendar days of the due date. _____
 - Will result in a Breach of Contract and all associated charges if payment is not RECEIVED with 14 calendar days of the due date. _____
 - May result in loss of participation in the installment plan in future. _____

IN WITNESS WHEREOF THE PARTIES AGREE TO THE ABOVE TERMS:

Signature: the resident	Date: _____
Student Identification Number: _____ - _____ - _____	Date: _____
Witness: Residence Services Representative	Date: _____