Lumpkin County
Parks and Recreation Department

Delayed Payment Form

The following is a contract between Lumpkin County Parks and Recreation Department and _____, and is for the following program _____. The chart below indicates the payment plan that is to be followed. If at any point the plan is not adhered to all privileges to participate in the program will be revoked until balance is paid off in full.

Please note that if you have more than one child, payment schedule is based on the total amount owed, and payments will be split evenly between children until the point comes where one or more of the children have a balance that is taken care of. At this point the remaining payments will be applied to the child(ren) still holding a balance.

Child 1: _____ Amount Owed: _____ Date Paid Off: _____

Child 2: _____ Amount Owed: _____ Date Paid Off: _____

Child 3: _____ Amount Owed: _____ Date Paid Off: _____

Child 4: _____ Amount Owed: _____ Date Paid Off: _____

Total Amount Owed: _____

Down Payment Made: _____

Current Balance: _____

Payment Schedule

Date	Amount	Running Total

_____
Director of Program

_____
Participant

_____
Witness

_____
Date

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