

BRSC Division I Payment Options (All Ages)

Payment Schedule – ALL checks payable to BRSC with Player’s **NAME** and **TEAM** noted

June 9th	\$100	First part of BRSC Club Fee due with acceptance letter*
August 17 th	\$225	Remainder of BRSC Club Fee
August 17 th	\$108	BRSC Camp Fee
August 17 th	<u>\$ 92</u>	BRSC Administrative Fee
Total	\$525**	**Total does not include uniforms.

**By accepting the invitation to play with BRSC and making the initial \$100 deposit, you are agreeing to the financial commitment for the full year. If you do not fulfill your obligation as a player, you will still be responsible for any and all finances due to BRSC. Any team expenses incurred will be billed at the end of each season.*

YOU MUST COMPLETE THIS FORM & SEND IT IN WITH YOUR ACCEPTANCE LETTER.

Payment Options: BRSC will offer 4 payment options for the Club Fee (please check only one):

- Full payment by August 17, 2009.
- Monthly automatic bank draft - To be divided equally over 6 months and your account will be drafted on the 17th of each month beginning August 17, 2009, and ending on January 17, 2010. Your bank draft authorization form must accompany this form.
- Monthly post-dated checks for up to 6 months. You may choose the date of the checks and the amount of each as long as the total due is paid in full by January 17, 2010. Your post-dated checks must be attached to this form.
- Monthly credit card payments. You may choose the dates you would like your credit card charged as well as the amount as long as the total due is paid in full by January 17, 2010.

MASTERCARD OR VISA ONLY. Please complete the information below to pay by credit card.

Credit Card # _____

Expiration _____ Circle One: MASTERCARD VISA

Dates & amounts of charges:

<u>Date(s)</u>	<u>Amount(s)</u>	<u>Date(s)</u>	<u>Amount(s)</u>
(1) _____	_____	(2) _____	_____
(3) _____	_____	(4) _____	_____
(5) _____	_____	(6) _____	_____

Signature: _____

Parent/Guardian/Contact Information:

Primary Contact: _____ Secondary Contact: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Player Name: _____ Age Group/Team: _____

In the event any payment method is not honored, you will receive an invoice by mail and/or email. You will have 15 days to make your payment including a \$25 NSF fee or your account will be assessed a late fee of \$20 for that month and each month thereafter.

Please contact Jennifer Ricard at (225) 924-2157 or jricard@brsa.org with any questions.

Mail: 142 Lobdell Ave B.R., LA 70806 or Fax: (225) 924-5674