

# Pay Later Information and Agreement

## Pay Later Information and Agreement

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BRRSD CSA understands that some people would prefer not to pay via credit card online. In an effort to give a different option, we have allowed for registrants to pay later.

To pay later, select Invoice Me Later. If you do choose Invoice Me Later, please make check payable to "CSA" and promptly mail to:

Council of Schools

c/o Summer Programs

PO Box 6091

Bridgewater, NJ 08807

NOTE: USPS mail has taken longer than expected recently. You must mail a check well in advance of deadline to be sure it is received on time.

**In order to have the option to pay later, please read the following and note your understanding by selecting yes under each statement, and then signing the document below.**

**1) I understand that if I select the pay later option, I must have a valid credit card on file with BRRSD CSA.**

*(Select only one option)*

Yes, I understand  
Statement 1

**2) I understand that I have 48-hours after my registration, and selection of pay later, to ensure the BRRSD CSA has my credit card on file. (If my card is not on file, my child/children will be removed from the programs they are registered into).**

*(Select only one option)*

Yes, I understand  
Statement 2

**3) I understand that payments are due by the Friday before the camp start date. If there is a wait list for the camp, I may be asked to pay sooner in order to secure the space as it keeps others from registering. For early bird registration, all payments are due within 2 weeks of registration or the early bird rate will be removed.**

*(Select only one option)*

Yes, I understand  
Statement 3

**4) I understand that check payments should not be mailed if it is within 2 weeks start time of the course. In this case, I should pay by credit card in order to ensure registration is complete for the first day of camp.**

**DropDown (Required):**

*(Select only one option)*

Yes, I understand  
Statement 4

**Name (Required):** \_\_\_\_\_

*Must be the cardholder's name*

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**Signature (Required):** \_\_\_\_\_  
*Must be the cardholder's signature.*

**Date (Required):** \_\_\_\_\_  
*Please format as mm/dd/yyyy*