Brevard Bulls Basketball Organization

P.O. Box 61195
Palm Bay, Florida 32906

Phone: 321-446-2556
E-mail: brevardbulls@vzw.blackberry.net
website: www.brevardbulls.org

2012 Brevard Bulls Travel Season Payment Plan Agreement

Parents Name: _____
Players Name: _____
Address: _____
Phone Number: _____
Email Address: _____

The 2012 Brevard Bulls Travel Season registration fees are **$275.00 per player**. The Brevard Bulls Basketball Organization is offering you a payment plan for the 2012 season fees. A minimum of $_____ (amount) is being applied to the above players account as a deposit. Weekly/Bi-Weekly/Monthly (circle one) payments in the amount of $_____ (amount) will be made on _____(day) towards this account with the final payment being due **on/before Feb. 21, 2012**. Payments will be accepted in the form of cash or check. Checks are to be made payable to **Brevard Bulls**. All returned checks are subject to a returned check fee of $25.00.

By signing this agreement you are saying that you agree to make the above deposit and payments as stated. If you experience any hardship with the above agreed upon plan, please contact Steve Hughes at 321-446-2556 or at brevardbulls@vz.blackberry.net.

_____ _____ _____ _____
Parents Signature Date Signature of Bulls Administrator Date

Date	Cash	Administrator Initials	Description	Total Amount	Payment	Balance
					Total	

Terms: Final Payment Due by Feb. 21, 2012