

BOOK RENTAL PAYMENT AGREEMENT  
MADISON-GRANT UNITED SCHOOL CORPORATION

Section I (To be completed by school personnel) \_\_\_\_\_

Building \_\_\_\_\_ School Year \_\_\_\_\_ Enrollment Date \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade \_\_\_\_\_ Amount Due \_\_\_\_\_

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Student Name: \_\_\_\_\_ Grade \_\_\_\_\_ Amount Due \_\_\_\_\_

Total Book Rental Fees Due.....\$ \_\_\_\_\_

Parent or Guardian's Driver's License Number: \_\_\_\_\_

Section II (to be completed by parent or guardian) \_\_\_\_\_

As I am unable to pay the total book rental fees for my student(s) at this time, I will: (initial one of the payment plans below)

\_\_\_\_\_ Pay the total book rental fees by August 31, \_\_\_\_\_

\_\_\_\_\_ Pay the total book rental fees in three payments as follows:

August 31 \$ \_\_\_\_\_ September 30 \$ \_\_\_\_\_ October 31 \$ \_\_\_\_\_

**\*\*Payments may be mailed or hand delivered to the School Office**

\_\_\_\_\_ Apply for State Textbook Assistance. I understand that State Assistance does not pay anything toward fees.

Failure to meet your selected payment plan will automatically subject you to collections. Collection and attorney fees may be added to the book rental fees and will be the responsibility of the Parent or Guardian.

I have read and understood all the terms of this agreement.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
(Street Name & Number) (City, State, and Zip Code)