Recreation Program Payment Plan

Town of Sebago Recreation Department

This payment plan sheet outlines the structured installment options available for municipal recreation programs with registration fees exceeding $100. Registrants can select from 30-day, 60-day, or 90-day terms, with frequencies customizable to weekly, bi-weekly, or monthly schedules.

Payment Plan Enrollment Guidelines

- **Eligibility:** Available only for programs with a total fee greater than $100.
- **Initial Deposit:** An upfront deposit may be required at the time of registration depending on program-specific policies.
- **Automation/Tracking:** Payments must be made according to the agreed schedule. For manual or staff-processed payments, ensure the tracking log on Payment Ledger is initialed by an authorized department representative.

30-Day Payment Plan Option

The total balance is divided equally over a 30-day period from the date of initial registration.

Frequency Choice	Number of Installments	Calculation Method
Weekly	4 Installments	Total Fee ÷ 4
Bi-Weekly	2 Installments	Total Fee ÷ 2
Monthly	1 Installment	Total Fee ÷ 1

60-Day Payment Plan Option

The total balance is divided equally over a 60-day period from the date of initial registration.

Frequency Choice	Number of Installments	Calculation Method
Weekly	8 Installments	Total Fee ÷ 8
Bi-Weekly	4 Installments	Total Fee ÷ 4
Monthly	2 Installments	Total Fee ÷ 2

90-Day Payment Plan Option

The total balance is divided equally over a 90-day period from the date of initial registration.

Frequency Choice	Number of Installments	Calculation Method
Weekly	12 Installments	Total Fee ÷ 12
Bi-Weekly	6 Installments	Total Fee ÷ 6
Monthly	3 Installments	Total Fee ÷ 3

Staff Payment Receipt Ledger

This page is to be completed by Town of Sebago Recreation staff as individual installment payments are rendered.

Participant Name: _____ **Program:** _____

Installment #	Scheduled Due Date	Amount Due	Date Paid	Staff Initials
Payment 1	_____	$_____	_____	_____
Payment 2	_____	$_____	_____	_____
Payment 3	_____	$_____	_____	_____
Payment 4	_____	$_____	_____	_____
Payment 5	_____	$_____	_____	_____
Payment 6	_____	$_____	_____	_____
Payment 7	_____	$_____	_____	_____
Payment 8	_____	$_____	_____	_____
Payment 9	_____	$_____	_____	_____
Payment 10	_____	$_____	_____	_____
Payment 11	_____	$_____	_____	_____
Payment 12	_____	$_____	_____	_____

Authorization & Agreement

By checking the selected options below and signing, the participant/guardian agrees to the recurring payment schedule specified. Failure to fulfill payments may result in suspension from the recreation program.

- **Selected Plan Duration: [ ] 30 Days [ ] 60 Days [ ] 90 Days**
- **Selected Frequency: [ ] Weekly [ ] Bi-Weekly [ ] Monthly** *(60 & 90 Day Only)*

Participant Name: _____
Program Name: _____
Total Program Fee: $_____
Calculated Installment Amount: $_____
Authorized Signature: _____ Date: _____