



FOREST TRAIL ACADEMY

ACADEMIC EXCELLENCE!

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support@foresttrailacademy.com

If these required documents are not submitted within 7 days of enrollment, the student's account will be placed on hold/inactive status until receipt of all applicable documents. Please do not submit incomplete forms as they will not be accepted.

AUTHORIZATION FORM

Please note that Forest Trail Academy offers the payment plan as a courtesy to parents/guardians who are unwilling or unable to pay tuition in full. If you choose to participate in this option, you are still responsible for the full tuition. Refunds are offered within 5 calendar days and do not include the \$225.00 non-refundable registration fee. If there is a third party paying on behalf of the student, we need a copy of their state ID, passport, or driver's license and they must sign this form.

STUDENT NAME		GRADE LEVEL	
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NAME ON CARD					CARD NUMBER				
CARD TYPE	VISA				AMEX				
EXPIRATION DATE	M	M	2	0	Y	Y	CVV (SECURITY CODE)		
ADDRESS									
	City		State		Zip Code		Country		
EMAIL ADDRESS									
OTHER PAYMENT OPTIONS ***select this option if you don't want to use credit card	PAYPAL		TRANSACTION ID						
	CHECK		CHECK NUMBER						
	MONEY ORDER		MONEY ORDER NUMBER						
	BANK WIRE*		BANK WIRE DATE						
	Please note there is a \$50.00 bank wire fee that must be sent along with payment.*								

PROGRAM SEEKING

ONLINE		Full Year		Semester		Dual Enrollment		Individual Course(s)	
CORRESPONDENCE		Full Year						Course(s) Applying	

PAY IN FULL

PAYMENT AMOUNT	\$		PAYMENT DATE	M	M	D	D	2	0	Y	Y
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PAYMENT PLAN

Please note that Forest Trail Academy offers the payment plan as a courtesy to parents/guardians who are unwilling or unable to pay tuition in full. If you choose to participate in this option, you are still responsible for the full tuition.
Refunds are offered within 5 calendar days and do not include the \$225.00 non-refundable registration fee.

DOWN PAYMENT AMOUNT	\$		DOWN PAYMENT DATE	M	M	D	D	2	0	Y	Y
MONTHLY PAYMENT AMOUNT	\$		MONTHLY PAYMENT DAY			D	D				

I have read and agreed to the terms and conditions. I authorize the charges for education services rendered by Forest Trail Academy, LLC.

CARDHOLDER'S NAME													
CARDHOLDER'S SIGNATURE					DATE	M	M	D	D	2	0	Y	Y