



## REGISTRATION FORM AND PAYMENT OPTIONS

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Day: \_\_\_\_\_ Eve: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Please check the certificate program you are enrolling in:

Executive Nonprofit Leadership       Executive Philanthropy & Resource Development

Session:  Fall       Spring      Year: \_\_\_\_\_

### **Tuition & FEES:**

*Please check one of the following:*

	<input type="checkbox"/> Non-FDU Graduate	<input type="checkbox"/> FDU Graduate
<b>Tuition</b>	\$1,500.00	\$1,350.00
<b>Registration Fee</b>	\$50.00 (non-refundable)	\$50.00 (non-refundable)
<b>Total Due</b>	\$1,550.00	\$1,400.00

- Check below the method to be used for payment of tuition.
- Return one copy of this form when paying your fees.
- Make checks payable to Fairleigh Dickinson University.

**Payment in full:** This pertains to personal payment or employer sponsorship. Payment is due before classes begin. If paying by credit card, please submit the Automatic Credit Card Authorization Form.

**Corporate Voucher / Direct Payment:** (Please specify) \_\_\_\_\_

**Deferred Payment Plan:** Payments are expected according to the Payment Schedule below. Please note you will not be billed monthly. If you are paying by check, a \$15.00 per month penalty will be assessed for all payments received after the due date.

### **Payment Schedule**

Date	Non-FDU Graduate	FDU Graduate
March 12, 2018	\$550.00	\$500.00
April 12, 2018	\$500.00	\$450.00
May 11, 2018	\$500.00	\$450.00

By registering for this program, you have entered into a contractual agreement with Fairleigh Dickinson University and you have an obligation to pay tuition and registration as well as all costs and expenses listed below that you may incur. Academic withdrawal or inability to secure an expected loan does not cancel this agreement.

#### CANCELLATION / WITHDRAWAL

Fairleigh Dickinson University reserves the right to cancel courses. In the event of a cancellation, registrants will be notified immediately and all fees will be returned in full. Students who wish to withdraw from the Program must submit a written request. The effective date of any notification of withdrawal will be the date of receipt by the Continuing Education Office. Persons wishing to cancel their enrollment must do according to the schedule noted below.

Non-attendance does not constitute an official drop or withdrawal.

**Third Party Billing:** If your employer has provided you with a voucher to pay your tuition expenses, please forward the form to Continuing Education for processing, by using the address above.

#### LATE PAYMENT CHARGE

A late payment charge will be assessed, during the term for enrolled students, in accordance with the appropriate schedule above. Such charge will be assessed at the time any payment (full or partial) is made, and shall be added to the then outstanding balance.

#### COLLECTION FEE

In the event you fail to honor your financial obligations under this contract, you will also be responsible to pay all collection costs associated with the University's attempt to collect the past due balance. Collections costs can include a third party collection fee of 30% of the past due balance. Fairleigh Dickinson University reserves the right to report unpaid account information to any credit bureau.

#### TUITION & FEES CREDIT POLICY

Upon valid Cancellation or Withdrawal, you may be entitled to a tuition credit. Application and registration fees are non-refundable. If the tuition credit results in an overpayment, Fairleigh Dickinson University will issue you a refund.

Withdrawal Effective Date:	Credit Amount
Prior to the class start	100% of tuition
Prior to 14 days from class start	80% of tuition
Prior to 28 days from class start	60% of tuition
Thereafter	0%

*It is understood that in the event you fail to honor your obligations under this contract, in addition to its other remedies, Fairleigh Dickinson University shall have the right to restrict future class registration, withhold transcripts, diplomas and any Certificate of Completion.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE SUBMIT A SHORT BIO (300 WORDS OR LESS) TO KDSING@FDU.EDU.**



**FAIRLEIGH  
DICKINSON  
UNIVERSITY**

**Center for Excellence**  
Leadership • Governance • Philanthropy

**Division of Continuing Education**  
1000 River Road, H-DH1-02  
Teaneck, NJ 07666  
Phone: 201.692.6500  
800.338.3887  
Fax: 201.692.6505  
Email: [ceinfo@fd.edu](mailto:ceinfo@fd.edu)

***This form will only be accepted by mail or fax***

### **Automatic Credit Card Authorization**

**Student Name:** \_\_\_\_\_

I authorize Fairleigh Dickinson University to automatically charge the following payments to the credit card listed below as payment for my tuition. I understand that my card will be charged according to the dates listed below, and I will receive no notification from Fairleigh Dickinson University that the charge has been made other than keeping a copy of this form for my records. I also understand and agree to the withdrawal and refund policy as stated on the Registration and Payment Options Form.

**Credit Card Payment**       **American Express**       **Visa**       **Master Card**       **Discover Card**

**Card No:** \_\_\_\_\_ **CVV #** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Name on Card (print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_

*If sending credit card information, please use USPS address or fax number above, DO NOT email scanned form.*

**Payment in Full: Personal Payment or Employer Sponsorship**

**Deferred Payment Plan: 1/3 due at registration. Future payment(s) by  Check or  Credit Card (complete information above). The entire balance must be paid by the end of the course.**

**If your Organization is paying for the course using a credit card, please provided the following information.**

**Agency Name:** \_\_\_\_\_

**Agency Address:** \_\_\_\_\_

**Agency Contact:** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Contact's E-Mail:** \_\_\_\_\_