



4081 Clearbrook Rd.
Abbotsford, BC
V4X 2M8

Tel: 604-859-3700
www.meischools.com
www.meihockey.com

Payment Schedule and Policy

The fees for the ten-month program are:

Level	MEI Student	Part Time Player
Elementary (Grade 1-5)	\$2250	\$1750
Middle School (Grade 6-8)	\$2250	\$1750
High School (Grade 9-12)	\$1500	
Goalie Fee (Grade 3-8 only)	\$500 (onetime payment)	

Payment Options

- Payment in full by cheque or credit card; or
- Payment by pre-authorized debit collected on the 15th day of each school month (September to June). Therefore, those choosing this option will make ten equal payments in the following amounts:

Level	MEI Student
Elementary (Grade 1-5)	\$225/mth (10 months)
Elementary Part Time Player (Grade 3-5)	\$175/mth (10 months)
Middle School (Grade 6-8)	\$225/mth (10 months)
Middle School Part Time Player (Grade 6-8)	\$175/mth (10 months)
High School (Grade 9-12)	\$250/mth starting Jan 15 th (6 months)

Payment Policy

- Parents are required to make suitable payment arrangements before the school year begins and no later than August 15.
- Monthly payments must be made by pre-authorized debit. The Pre-Authorized Debit Agreement Form is attached.
- Any monthly payments returned NSFs will be subject to a \$25 administration charge.
- Student fees are non-refundable **except** for students who withdraw from the Academy due to relocation out of the area or for medical conditions authorized by a doctor.
- Tuition and Hockey Academy accounts are expected to be in good standing in order to maintain registration in the Academy. Continued failure to keep these accounts up-to-date may result in the student being asked to leave the Academy.
- If a family is unable to comply with the above policies, they must communicate with the Program Director and alternative arrangements may be made if extenuating circumstances exist.



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MEI Hockey Academy Pre-Authorized Debit (PAD) Agreement

1. Customer Information *(Please print clearly)*

First and Last Name(s): _____ / _____ Complete

Address: _____ Telephone: _____

Email: _____

Payment is made by: an Individual a Business

Student's Name: _____ Grade: _____

Student's Name: _____ Grade: _____

2. Bank Account Information *(Please include a VOID cheque)*

Account Number: _____ (maximum 12-digits)

Branch Number: _____ (5-digits) Institution Number: _____ (3-digits)

Financial Institution: _____

Branch Location: _____

3. Pre-Authorized Debit Details

I/We authorize Mennonite Educational Institute Society (operating as MEI Schools) to debit the bank account identified above as per my/our instructions for monthly recurring payments and/or one-time payments from time to time, for payment of fees arising under my/our MEI Hockey Academy fees account. Regular monthly payments for participation in the MEI Hockey Academy will be debited to my/our account on the 15th day of each month or the next business day (September to June). **I/we hereby waive the standard pre-notification period.**

I/We may revoke this authorization at any time and it will remain in effect until I/we provide MEI Finance Office notification of its change or termination. This notification must be received at the school address provided above no less than ten (10) business days before the next debit is scheduled. I/we may obtain more information on my/our rights to cancel a PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca.

I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca. Please contact the Finance Office for all reimbursements.

Account Holder Signature: _____ Date: _____

Account Holder Signature: _____ Date: _____



MEI Schools 4081 Clearbrook Rd T 604.859.3700
 Administration & Abbotsford, BC F 604.859.9206
 Finance Office V4X 2M8 meischools.com



2022-2023 CREDIT CARD PAYMENT AGREEMENT

HOCKEY ACADEMY FEES

Please complete this form if you would like to pay your child(ren)'s Hockey Academy fees by credit card.

I hereby authorize MEI Schools to charge my credit card, specified below, for the payment of fees.

Annual: One payment on September 1, 2022

Payor's Name: _____

Address: _____

Phone #: _____

Student's Name (Last, First)	Grade	Hockey Academy Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Credit Card information:

Visa / MasterCard #: _____

Expiry Date: _____ / _____ CVV / CVC # _____ (3 digit number on the back of the credit card)

Card Holder's Name: _____

Card Holder's Signature: _____ Date: _____