



Ministries for Spiritual Development

# Payment Agreement for SDSG

Today's Date

Name

Email

Address

Phone

City

State

Zip Code

We ask that you complete this form online, save and/or print a copy for your records, and email it back to Betsy Keller at [oasismin@oasismin.org](mailto:oasismin@oasismin.org). Your first payment of \$350 is appreciated in September, followed by 7 monthly payments of \$335 each. If you need to make other arrangements, check the appropriate box below. Thank you.

Tuition for 2018-2019 SDSG II - \$2695

Subtract first payment included today - **\$350**

Total Due by Closing Retreat in May - **\$2345**

Please select from the following to let us know how you intend to pay your balance:

- I would like to pay the full amount of tuition today - \$2695
  - Enclosed is a check for \$2695 (please make checks out to Oasis Ministries)
  - I would like you to charge my credit card (please complete your card information below)

- I would like to pay in 7 equal monthly installments of \$335 each month from October through April
  - I would like you to automatically charge my credit card each month (please complete the credit card information below) (*this is the preferred method of receiving payment*)
  - I will pay by credit card online through the Oasis Ministries website store (visit [oasismin.org/store](http://oasismin.org/store))
  - I will send a check each month (please make checks out to Oasis Ministries)

- I would like to make other arrangements with your office
 

Please contact Betsy at our office (717) 737-8222 or [betsykeller@oasismin.org](mailto:betsykeller@oasismin.org)

### Credit Card Information

Visa/Mastercard/Discover card # \_\_\_\_\_

Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ 3-digit code on back \_\_\_\_\_

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

*Your signature authorizes Oasis Ministries to charge this credit card according to the specified method in this agreement.*

How are you paying for the first payment of \$350?

Check is enclosed

Please charge my credit card

Other, please specify:

\_\_\_\_\_

Please return this form along with your first payment of \$350 to:

Oasis Ministries  
419 Deerfield Road  
Camp Hill, PA 17011

419 Deerfield Road  
Camp Hill, PA 17011

717-737-8222  
[oasismin@oasismin.org](mailto:oasismin@oasismin.org)