

U.S PRANIC HEALING CENTER American Institute of Asian Studies LLC

6251 Schaefer Ave Unit C Chino, CA 91710

T 909.548.0884 F 909.548.0886 marcos@pranichealing.com www.pranichealing.com

Payment Plan Agreement

l,	have paid a deposit as preregistration of
\$	s <u>0</u> as partial payment for the Master Choa Kok Sui
	course held on 5/21-22/22 I am aware that the full amount of this
course is \$	
I promise to pay the American Institute	e of Asian Studies, LLC for the balance owed of \$ Monthly
	charged every 15 th of the month and will be paid in full within
month(s) of the course. This total amour	nt is due by
*I am aware of my responsibilinhether a bill is received or not. *	ity to remit the payment to the American Institute of Asian Studies, LLC
charge the following credit card accourto the method of payment or the mo	payment, I hereby authorize the American Institute of Asian Studies, LLC to not for the amount due on the 15 th of each month. If I need to make changes onthly charge date after the signing of this agreement, I will contact the C immediately to discuss these revisions.
Please fill out the Required Portion bell Send In: Check Money Orde Charge to Credit Cards Master	er Cash
Charge to Credit Card: Master	
Credit Card Number	Exp. Date: Code:
PRINT Your Name as it appears on you	ır Credit Card:
N/ C [†] /	Today's Date
mells A.I.I.	Telephone
· ·	Email
**************************************	OFFICE USE ONLY
Note:	Payments:
	_
	-
· · · · · · · · · · · · · · · · · · ·	