

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

6251 Schaefer Ave Unit C Chino, CA 91710

T 909.548.0884

marcos@pranichealing.com www.pranichealing.com

Payment Plan Agreement

L.	have paid a deposit as preregistration of
\$ 1,225 / at the door of	\$ 0.00 as partial payment for the Master Choa Kok Sui
Healer's Mastery Lisle, IL (New)	course held on $4/11-15/24$. I am aware that the full amount of this
course is \$ _2,450	
I promise to pay the American Institute	of Asian Studies, LLC for the balance owed of \$_1,225 Monthly
navments of \$ will be ch	harged every 15th of the month and will be paid in full within
month(s) of the course. This total amount	t is due by . (1 to 4 months)
monui(s) of the course. This total amount	t is due by
*I am aware of my responsibility to remit the payment to the American Institute of Asian Studies, LLC whether a bill is received or not. *	
charge the following credit card account	ayment, I hereby authorize the American Institute of Asian Studies, LLC to t for the amount due on the 15th of each month. If I need to make changes on the charge date after the signing of this agreement, I will contact the immediately to discuss these revisions.
DI CHI LA DI LA DI CALLA DA CA	
Please fill out the Required Portion belo	
Send In: Check Money Orde	er Cash
Charge to Credit Card: MasterC	Card Visa Discover AMEX
Credit Card Number	Exp. Date: Code:
PRINT Your Name as it appears on your	r Credit Card:
	T 1 / D /
	-1
Billing Address:	200
-	Email
	OFFICE USE ONLY
Note:	Payments:
-	
2	
	*
	1