U.S PRANIC HEALING CENTER American Institute of Asian Studies LLC 6251 Schaefer Ave Unit C Chino, CA 91710

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Payment Plan Agreement

I promise to pay the American Institute of Asian Studies, LLC for the balance owed of \$_412.50 _____. Monthly payments of \$______ will be charged every 15th of the month and will be paid in full within ______ month(s) of the course. This total amount is due by______. (1 to 4 months)

*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. *

In the event that I missed sending my payment, I hereby authorize the American Institute of Asian Studies, LLC to charge the following credit card account for the amount due on the 15th of each month. If I need to make changes to the method of payment or the monthly charge date after the signing of this agreement, I will contact the American Institute of Asian Studies, LLC immediately to discuss these revisions.

Please fill out the Required Portion below: Send In: Check Money Order	Cash
Charge to Credit Card: MasterCard	Visa Discover AMEX
Credit Card Number	Exp. Date: Code:
PRINT Your Name as it appears on your Cre	dit Card:
Your Signature:	Today's Date
Billing Address:	Telephone
	Email
	-OFFICE USE ONLY
Note:	Payments: