

AMPHITHEATER PUBLIC SCHOOLS
ALL-DAY KINDERGARTEN
2019-2020

PAYMENT FORM

SCHOOL Wilson K-8 School DATE _____

STUDENT NAME _____

PAYER'S NAME _____

Please check appropriate areas:

_____ \$442.00 Registration (Due no later than May 10, 2019)

_____ \$464.00 1st Semester (Due no later than August 16, 2019)

_____ \$464.00 2nd Semester (Due no later than January 10, 2020)

\$_____ Total Payment School Receipt # _____

All payments are non-refundable.

\$100.00 Late Fee if deadline is not met for Semesters 1 or 2.

No prorations for late registrations.

Method of Pay (check one)

_____ Check, Cash or Money Order – *no tax credit requested*

_____ Check, Cash or Money Order – Tax Credit form required

_____ Credit Card – Credit Card form required

– SUBMIT ALL MONEY AND FORM(S) TO FINANCE –

Original – School Copy – Finance

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CREDIT CARD PAYMENT FORM

SCHOOL Wilson K-8 School DATE _____

STUDENT NAME _____

Amount being paid by Credit Card \$ _____

Name on Credit Card _____

Address of Card Holder _____

City, State, Zip _____

Email Address
(required for tax credit receipt) _____
please print clearly

Credit Card Number _____

Credit Card Type _____
VISA/MasterCard only

Expiration Date _____

Card ID Code * _____

**The three- or four-digit identification number printed on the back of the credit card. This number is usually near the signature block.*

If you want this payment applied toward a Tax Credit Donation, please check appropriate box:

_____ Please apply \$200.00 as a Tax Credit Donation

_____ Please apply \$400.00 as a Tax Credit Donation

**Specific Activity Tax Credit Receipt
Request Form**

This field trip/activity is eligible to receive tax credit on your State of Arizona tax return. Amphitheater Public Schools Tax ID: 86-6000547 and CTDS: 100210168.

The State of Arizona allows you to claim \$200.00 per year (\$400.00 if married, filing jointly) in tax credits for monies paid for extracurricular fees or which they donate/contribute for the support of extracurricular activities to an Arizona public school. You can contribute up to \$200 (\$400) to an Arizona public school extracurricular program and also reduce your Arizona tax liability by the same amount in the same year.

In order for you to receive a tax credit receipt for this field trip/activity this form must be filled out and **submitted with your payment**. Retroactive receipts can not be issued once the money has been deposited.

Please note that if you apply for this receipt, the money cannot be refunded. It is considered a tax donation, and thereby is non-refundable.

Student Last Name: _____ **First Name** _____

Parent/Donor Last Name: _____ **First Name:** _____

Parent/Donor Email Address: _____

Home Address: _____

Zipcode: _____ **Amount:** _____

Name of Activity: Full Day Kinder Program