HCPSS Summer Programs



Summer Programs Registration Payment Form

Payments will only be accepted for students who have been **enrolled in a course or program** (not on a waitlist). You will receive an invoice from MySchoolBucks outlining the fees for each student. Complete a **separate payment form** and check or money order payable to **HCPSS** (not the student's home school) **for each student** and mail them to the following address: HCPSS Summer Programs, 10910 Clarksville Pike, Ellicott City, MD 21042.

Student Name:			Grade:
School:			Birthdate:
Summer Program (NOTE: must be enrolled in the program before submitting payment)			
□ BSAP Summer Institute □ G/T Summer Institute □ Innovative Pathways HS			
Parent/Guardian Name:			
Parent/Guardian Address:			
Email Address:			Phone:
MySchoolBucks Invoice Number:			
Payment Amount:	Payment Date:		Name on Check/Money Order:
☐ Check ☐ Money Order Please make check/money order payable to HCPSS			Check/ Money Order #:
Envision Payment Solutions is pleased to have been selected by HCPSS as its check service provider. Please be aware that if your check is returned, it may be re-presented electronically. Also, in presenting a check for payment, you authorize service charges and processing fees to be debited from the same account should the check be dishonored. These fees, as permitted by state law, may be debited as a paper draft or an electronic funds transfer, at our option. Each dishonored item is subject to the applicable returned check fee of \$35.00. For HCPSS Summer Programs Use Only:			
Payment Received By:		Date Pa	lyment Received:
☐ On-Site ☐ Mail			☐ Updated MySchoolBucks Invoice