



## **SPLIT BILLING AGREEMENT**

Thank you for choosing the Boys & Girls Club of the Red River Valley program. Our records indicate that you wish to proceed with split billing arrangements. To implement split billing, each party must agree to the responsible percentage indicated below and identified as Parent/Guardian #1 and Parent/Guardian #2. All information must be completed and signed. Questions about this form can be directed to [billing@bgcrrv.org](mailto:billing@bgcrrv.org) or (701) 235-2147.

### **Statements and Payments**

Statements are emailed or mailed every other Wednesday and include charges from the previous 2-week period. Checks or money orders are payable to the Boys & Girls Club of the Red River Valley and mailed to: **BGCRRV, 2500 18th Street South, Fargo, ND 58103**

For your convenience, payments are also accepted by phone or in person at the administrative office listed above. Please do not leave payments with site staff as they do not have the means to secure your payment during the day. Visa, MasterCard and Discover Card are accepted. If paying with cash, a receipt will be issued - please note that the Boys & Girls Club of the Red River Valley does not keep cash on hand and will not be able to provide change. If paying with a check or money order, please write your youth's name(s) on the "memo" section to ensure we credit the correct account. Checks returned as nonsufficient funds may be subject to a \$30 NSF fee.

### **Payment Options**

Three options for payment are offered: automatic payment, online bill pay (click to pay) and pre-pay.

#### **1. Automatic Payment**

The Boys & Girls Club of the Red River Valley offers an automatic payment option to all participants by using a credit card, debit card, or bank account. Once you have made arrangements, your payments will be deducted automatically on a bi-weekly schedule according to the program payment dates as provided in our e-newsletter and on our website ([www.bgcrrv.org](http://www.bgcrrv.org)). Please note: all account information must be renewed with each registration.

#### **2. Online Payment**

If you choose to receive statements by email, each statement will contain a hyperlink that says 'Pay Your Bill Online.' This link will take you directly to your secure account balance where you can enter the amount you wish to pay. This option can be used to pay by statement every other week or to pre-pay your services.

#### **3. Pre-payment**

Pre-payment means paying for child care services in advance. Participants may opt to pay for one week in advance, two weeks in advance or more.

### **Delinquent Accounts**

For an account to remain current, payment of a statement is due one week after the statement is sent. Statements are emailed or mailed every other Wednesday, and are due the following Wednesday. If an account balance remains unpaid after its due date, the following will occur:

- The youth will be prohibited from attending the program until the account is in good standing.
- If there is a waiting list at the site that the suspended youth attends, the youth will move to the end of the waiting list.
- If the account remains past due with no attempt to cure the debt, the account will be turned over to a collection agency.
- Applicable fees may be applied to your account balance.
- Accounts with a history of being delinquent will be required to enroll in Automatic Payment.

### **Financial Assistance**

The Boys & Girls Club of the Red River Valley partners with the Cass County Social Service's Child Care Assistance (CCA) program. If you are in need of financial assistance in order to pay for child care, please contact Cass County Social Services to apply for aid: (701) 241-5761 <http://www.nd.gov/dhs/services/financialhelp/childcare.html>

ADMINISTRATIVE OFFICE  
BOYS & GIRLS CLUB AT MIDTOWN  
2500 18<sup>TH</sup> ST S | FARGO, ND 58103  
BGCRRV.ORG | (701) 235-2147

UPDATED 2/19/20



**BOYS & GIRLS CLUBS**  
OF THE RED RIVER VALLEY

**1. CCA Participant Responsibilities**

- If you are currently receiving Child Care Assistance, or enter into the program at a later date, it is your responsibility to provide a copy of your award letter to our office.
- Please ensure that billing forms are completed in their entirety and submitted to our administrative offices in a timely manner each month to ensure prompt payment and proper credit to your account.
- If you are responsible for a co-payment, please make every attempt to maintain regular payments each month so that your county benefits are not adversely affected.
- Any amount billed for child care that is not covered by CCA is your responsibility – non-payment of past due amounts on CCA accounts will be considered delinquent and are subject to the same repercussions for all other delinquent accounts.

**2. Scholarship Assistance**

The Boys & Girls Club of the Red River Valley receives grant funding each year dedicated to assist participants who may be in financial need. Some families are already receiving CCA; others may not qualify for county assistance, but still find they need help with their child care payments each month.

- Scholarship dollars are available for each trimester:
  - Spring scholarship dates cover January – May
  - Summer scholarship dates cover June – August
  - Fall scholarship dates cover September – December
- Deadlines for scholarship applications can be found on our website.
- The application can be found on our website [www.bgcrrv.org](http://www.bgcrrv.org) at: About -> Forms & Registration -> Other Forms -> Scholarship Application.
- Scholarship funds are limited and are awarded based on need.
- Past due accounts may result in the loss of the scholarship award and are subject to the same repercussions for all other delinquent accounts.

**Child's Name:** \_\_\_\_\_

**Effective Program:** Summer \_\_\_\_\_ **School Year** \_\_\_\_\_

**Parent/Guardian #1**

**Responsible %:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City, State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

I have read and understand the split billing agreement.

**Parent/Guardian #2**

**Responsible %:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City, State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

I have read and understand the split billing agreement.

**OFFICE USE ONLY**

**Received by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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