

TO BE USED FOR ADVANCED PAYMENT ONLY

**STUDENT DEPOSIT FORM TO BE RETURNED WITH ADVANCED PAYEMENT**

Student Name \_\_\_\_\_ PIN # \_\_\_\_\_ Grade \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_

Cash Amount \_\_\_\_\_ Check Amount \_\_\_\_\_ Check # \_\_\_\_\_  
(please make check payable to: **Madison-Plains Local Schools**)

**CHOOSE PAYMENT OPTION:**

**CASH ON ACCOUNT** Cash/Check Debit Amount; \_\_\_\_\_

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