



FIELD SCHOOL PAYMENT STUB

Payment Method: Personal Check
 Cashier Check

Purpose: Deposit
 Tuition Balance

Field School: _____ Sum paid: \$ _____

I acknowledge that I read, understand and accept the IFR Withdrawal and Cancellation Policy (<http://bit.ly/2iGvNwY>). I further acknowledge that I understand that my Deposit Fee is nonrefundable and Tuition Fees may be refundable only up to the payment deadline date, as posted on the IFR individual field school home page.

Student Personal Information (please send with your payment)

Full Name:

Email:

Signature:

This payment stub must be sent with all payments – both deposit and tuition payments. Payments may be made by parties other than the student him/herself. In all cases, please clearly print the name of the student and the program attending so credit may be applied to the correct person.

Please mail this stub and your payment to:

**Institute for Field Research
2999 Overland Ave. #103
Los Angeles CA. 90064**

Questions? Email or call info@ifrglobal.org, (877) 839-4374