



Champaign Unit 4 Schools Kids Plus Program

1103 N. Neil Street
Champaign, Illinois 61820-5818

Telephone: (217) 351-3719
FAX: (217) 352-7960

Payment Slip

For payments that are mailed or placed in our deposit box, please fill out the information below and attach it with your payment.

Parents/Guardians Name: _____ School: _____

Students (s) Name: _____ Total: \$ _____

Cash Check # _____

Check what payment is to be credited towards:

____ Monthly Tuition ____ Days Out ____ Intersession ____ Overdue Balance
____ Co-Payment ____ Fieldtrip ____ Spring Break

Month of Tuition/Day of Program or Trip: _____ Other: _____

Make checks payable to "Champaign Community Schools"

Check if you would like a receipt.



Champaign Unit 4 Schools Kids Plus Program

1103 N. Neil Street
Champaign, Illinois 61820-5818

Telephone: (217) 351-3719
FAX: (217) 352-7960

Payment Slip

For payments that are mailed or placed in our deposit box, please fill out the information below and attach it with your payment.

Parents/Guardians Name: _____ School: _____

Students (s) Name: _____ Total: \$ _____

Cash Check # _____

Check what payment is to be credited towards:

____ Monthly Tuition ____ Days Out ____ Intersession ____ Overdue Balance
____ Co-Payment ____ Fieldtrip ____ Spring Break

Month of Tuition/Day of Program or Trip: _____ Other: _____

Make checks payable to "Champaign Community Schools"

Check if you would like a receipt.