YWAM Mombasa School of Biblical Studies (SBS) Fee Agreement Form

Student Information

Full Name:		Nationality:	
Passport/ID Number:		Email:	

Course Information

Course Name: **School of Biblical Studies (SBS)**
Course Duration: 9 months
Course Start Date: _____
Course End Date: _____

Fee Structure

The fees for the School of Biblical Studies at YWAM Mombasa are categorized into three groups based on geographic region and economic capacity. Please select the category that applies to you:

- **Category A (Developed Nations)**: USD **2,700**
- **Category B (Developing Nations)**: USD **1,700**
- **Category C (Underdeveloped Nations)**: USD **1200**

Your Fee Category:

Please tick the appropriate box:
☐ **Category A** (USD 2,700)
☐ **Category B** (USD 1,700)
☐ **Category C** (USD 1200)

Payment Schedule

The full course fee is due before the start of the second quarter unless otherwise agreed upon in writing. 250USD (as part of the school fees) is due before the start of the course without which there will be no admission. Please select your preferred payment method and schedule:

- **One-time payment**
  ☐ I agree to pay the full amount in one installment by the course start date.
- **Payment in installments** (Subject to prior agreement)
  ☐ I agree to pay in ___monthly installments of USD _____.
  The first installment is due on: _____.

Payment Method

Please choose your payment method:
☐ Bank Transfer
☐ Paypal Payment
☐ Cash Payment
☐ Other (specify): _____

Terms and Conditions

1. **Non-Refundable Application Fee**:
   This fee has been indicated in your online application form and it is not refundable once paid.
2. **Payment of Fees**:
   All fees must be paid as per the agreed schedule. Failure to pay the fees on time may result in the student's removal from the program.

Declaration by Student

I,_____, confirm that I have read and understood the above fee structure and terms and conditions. I agree to pay the applicable fees for the School of Biblical Studies at YWAM Mombasa according to the selected category and schedule. I understand that failure to comply with the terms of this agreement may result in my dismissal from the program.

Student Signature: _____
Date: _____

YWAM Mombasa Representative Signature: _____
Date: _____

Important Notes:

1. **Visa Fees and Travel Expenses**:
   Students are responsible for obtaining their own visas and covering all travel expenses to and from Kenya.
2. **Health Insurance**:
   It is the student's responsibility to have adequate health insurance during their stay in Kenya.
3. **Emergency Contact Information**:
   Name: _____
   Phone Number: _____
   Relationship: _____