



The Arc

Achieve with us.

## Payment Options for Special Needs Trust

Trust for the Benefit of \_\_\_\_\_

The Foundation of The Arc of Northern Virginia supports four payment methods for the trust program's enrollment fee (\$\_\_\_\_\_). Select your preferred option below and sign at the bottom of this form.

### Options:

\_\_\_\_\_ 1. **Disburse from Trust Account.** If you plan to fund the account upfront, you can request that the enrollment fee be disbursed from the new trust account once it is established. Please complete and sign the Enrollment Fee Disbursement Request form.

\_\_\_\_\_ 2. **Pay by check.** Please prepare a check payable to "The Foundation of The Arc of Northern Virginia" for \$\_\_\_\_\_. Be sure to write "Enrollment Fee [SF/FF] SNT fbo [individual's name]" in the memo section of the check.

\_\_\_\_\_ 3. **Pay by Credit Card.** Please complete the following:

Name as it appears on the card \_\_\_\_\_

Credit Card:  Visa  Master Card  Discover  American Express

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

By signing below, you approve The Foundation of The Arc of Northern Virginia to charge your account \$\_\_\_\_\_ AND the following processing fees: for M.C., Visa & Discover: \$0.23 + 3.05% (or \$\_\_\_\_\_); for AmEx: \$.40 + 3.20% (or \$\_\_\_\_\_).

Signature of Cardholder \_\_\_\_\_

\_\_\_\_\_ 4. **Payment Plan.**  Monthly OR  Quarterly, paid in full within one year.

By:  Check OR  Credit Card OR  Cash

IF credit card, please complete the following:

Name as it appears on the card \_\_\_\_\_

Credit Card:  Visa  Master Card  American Express  Discover

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

By signing below, you approve The Foundation of The Arc of Northern Virginia to charge your account \$\_\_\_\_\_/month OR \$\_\_\_\_\_/quarter. The following additional fees will apply: for M.C., Visa & Discover: \$0.23 + 3.05% and for AmEx: \$.40 + 3.20%.

Signature of Cardholder \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_