

# MIDDLE BUCKS INSTITUTE OF TECHNOLOGY

2740 York Rd.  
 Jamison, PA 18929  
 Attn: Student Forms

TEL: 215-343-2480  
 FAX: 215-343-8626

## ***Invoice / Statement For:*** **Public Safety - Returning Students**

Description	Price per item	Quantity	Total per item
<b>Student Activity Fee</b> <i>(covers SkillsUSA student organization events and a portion of the cap &amp; gown package for Senior Recognition)</i>	\$30.00	1	\$30.00
Personal EMT Kit	\$60.00	1	\$60.00
<b>Total Balance Due to MBIT By: August 31, 2024</b>			<b>\$90.00</b>

*If you are unable to pay the total balance in full by the due date, please contact the Guidance office.*

Please detach and return bottom portion



**Reminder:** Please include this bottom portion with your **check made payable to "MBIT"**, or MasterCard/Visa information, along with other required student forms. Your cancelled check or credit card statement will serve as your receipt of payment.

**REMITTANCE:**

**Student Name:** \_\_\_\_\_

**Course of Study:** **Public Safety - Returning Students** \_\_\_\_\_

**Amount Due:** **\$90.00** \_\_\_\_\_

**Amount Enclosed:** \_\_\_\_\_

***If paying via Credit Card:***

**Name of Cardholder:** \_\_\_\_\_

**Mastercard/Visa #:** \_ \_ \_ \_ - \_ \_ \_ - \_ \_ \_ \_ **Exp. Date:** \_ \_ / \_ \_

**CVC (3 digit code on back of card)** \_ \_ \_

***MBIT USE ONLY:***

\_\_\_\_\_  
**DATE RECEIVED / INITIALS**

\_\_\_\_\_  
**CASH / CHECK / CREDIT**  
 PSA 6790-660