

INVOICE

[Language School Name]

[Street Address]

[City, State, Zip]

[Email/Phone]

Invoice #: [0000]

Date: [MM/DD/YYYY]

Due Date: [MM/DD/YYYY]

BILL TO:

[Student/Client Name]

[Address]

[Phone Number]

PROGRAM DETAILS:

Language: [Target Language]

Program: [Intensive/Summer/Private]

Duration: [Start Date] to [End Date]

Description	Quantity/Weeks	Unit Price	Amount
Language Tuition Fees	[0]	\$0.00	\$0.00
Registration & Enrollment Fee	1	\$0.00	\$0.00
Learning Materials & Textbooks	[0]	\$0.00	\$0.00
Accommodation (Homestay/Dorm)	[0]	\$0.00	\$0.00
Cultural Activities & Excursions	1	\$0.00	\$0.00

Subtotal: \$0.00
Tax/VAT: \$0.00

Total Amount: \$0.00

Payment Instructions:

Bank: [Bank Name] | Account: [Account Number] | Swift/BIC: [Code]
Please include the Invoice Number as a payment reference.

Thank you for choosing our immersion program!