

[Homeschool Program Name]

[Street Address]
[City, State, Zip]
[Email/Phone]

INVOICE

Invoice #: _____

Date: _____

BILL TO:

[Parent/Guardian Name]
[Student Name(s)]
[Address]

ENROLLMENT TERM:

[e.g., Fall 2024 / Full Year]

Description	Qty	Unit Price	Total
Registration/Enrollment Fee		\$	\$
Tuition - [Student Name]		\$	\$
Curriculum & Materials		\$	\$

Description	Qty	Unit Price	Total
Extracurricular/Lab Fees		\$	\$

Subtotal: \$ _____

Discounts/Scholarships: (\$ _____)

TOTAL DUE: \$ _____

Payment Instructions:

Please make checks payable to **[Program Name]** or pay online via [Payment Link/Portal].

Due Date: [Date]

Thank you for choosing our program for your child's education.