



Concordia Theological Seminary
Financial Aid Office
6600 North Clinton Street
Fort Wayne, IN 46825
260-452-2151

2021-22 Fall Quarter Tuition Payment Form

Joyful Response[®]

*Our school offers you a way to
respond joyfully in meeting your
tuition payment commitments.*

- Enjoy saving time and cost of writing checks.
- Make tuition payments consistently and conveniently.
- Help you prepare and fulfill your tuition payment commitments with ease.
- Any fees incurred due to insufficient funds in your bank account will be charged to your CTS student account.
- This form is valid for only one quarter. A new form must be submitted for each quarter that you desire to use the ***Joyful Response***[®] payment plan.
- Please be sure to submit a payment plan that will have your CTSFW bill paid in full by the ending date.
- Your total tuition payment for the quarter must be equally divisible into three payments.
- Attach a voided check or savings deposit slip to the other side of this form.
- Return this form to the Financial Aid Office by **Sept. 10, 2021**.
- There is a \$25 per quarter fee to participate in this payment plan.
- The \$25 fee will be charged to the student's account before the end of the quarter. Please take this into consideration when calculating your payment amount.

Joyful Response service provided by:
Lutheran Church Extension Fund
10733 Sunset Office Drive, Suite 300
St. Louis, MO 63127-1020
1-800-843-5233 • www.lcef.org

LCEF is a nonprofit religious organization; therefore, LCEF investments are not FDIC-insured bank deposit accounts. This is not an offer to sell investments, nor a solicitation to buy. The offer is made solely by LCEF's Offering Circular. Investors should carefully read the Offering Circular, which more fully describes associated risks.

Joyful Response® Electronic Tuition Payment Program offered through
Concordia Theological Seminary, Fort Wayne, IN

Enrollment/Change Form

Complete this form and return it to the Financial Aid Office to begin or change your current tuition payment. Your payments will be made automatically from your bank account or your LCEF StewardAccount®.

Check the appropriate box:

- New enrollment Payment change Account information change

PLEASE PRINT LEGIBLY

Payer Last Name	Payer First Name	MI	Daytime Telephone #
Mailing Address		City, State, Zip	E-mail Address
Student Name (if different from Payer)	Program	D000	CTS Student ID#

My Payment Plan		
_____ divided by _____ = \$ _____	3	_____
<i>Total Tuition Payment for Quarter</i>	<i>Months to Pay</i>	<i>Monthly Transfer Amount</i>

Debiting Account

Debit from:

- Checking
 Savings
 LCEF Steward Account

Transfer dates:

- Sept. 17, 2021
Oct. 12, 2021
Nov. 12, 2021

Account Number _____

Start date: Sept. 17, 2021

Routing Number (First nine numbers in bottom left-hand corner of check) _____

End date: Nov. 12, 2021

Authorization	
I authorize the above-named organization to process debit entries from my account. This authority will remain in effect until I give reasonable notification to terminate this authorization or until the last specified payment date.	
Authorized Signature for Account _____	Date _____

TO BE COMPLETED BY SCHOOL OFFICE			
Student ID# _____	Vanco Client ID# S9999014	Initials _____	Date _____

Attach a voided check or savings deposit slip here.