

Weekend Program Payment Options

The Weekend Program Fee is \$690 (as of 08/13/2022 – for residential retreat weekends)

Full payment is appreciated. A minimum \$190 nonrefundable deposit will reserve space on a weekend, the \$500 balance is due seven (7) days before the weekend program start date.

Payment Plan Options

Victories understands that participants may need flexibility to pay the program fee. We offer two general payment plans: \$190 nonrefundable deposit, and then a payment plan of \$84/month for 6 months or \$42/month for 12 months (credit or debit card required). Custom plans will also be considered.

Payment plans begin the 15th of the month after the weekend. For example, if a weekend occurs October 21-23, 2022, the first installment would be charged November 15, 2022.

Financial Assistance

Victories is happy to offer additional financial assistance to those who need it. We understand that it can be difficult to ask for help, but we encourage you not to let financial concerns stand in the way of attendance. We can help you attend a weekend on a payment plan that works for you. Please complete our Financial Assistance Form (see pages 3-4) and return to Victories.

Refund Policy

- A. If you cancel prior to two weeks before the weekend, all payments will be refunded less the \$190 nonrefundable deposit.
- B. If you cancel within two weeks before the weekend, all payments will be refunded less the \$190 nonrefundable deposit.
- C. If you cancel less than 48 hours prior to the weekend, you will receive no refund.
- D. No other refunds.

Registration

To register for a weekend, please complete the following pages, as appropriate. Return the form(s) via scan/email or mail. If you have any questions, please call the Victories Office at 312.604.5013 or email at admin@victoriesformen.org.

Financial Assistance Form

Thank you for considering a Victories program. To be considered for financial assistance, complete and return this form to Victories via mail or email. Questions? Contact Victories at 312.604.5013 or admin@victoriesformen.org.

Name: _____ Date: _____

Phone: _____ Email: _____

Mailing Address: _____

What is your birth date: ____/____/____

month date year

Who referred you to Victories? _____

Please provide first and last name (if applicable):

Is this person your therapist? ____yes ____no

Victories Program You Wish to Attend:

- BreakThrough Weekend, Dates: _____
- Wisdom Years Weekend, Dates: _____
- Shadow Weekend, Dates: _____
- Couples Weekend, Dates: _____
- Training / Other _____ Dates: _____

Please answer the following questions to help us more fully understand your financial need and interest in the Victories program(s) for which you are applying.

1. Please describe the amount that you can contribute to your program fee (standard cost is \$690, \$795 for Couples):
 - The total amount that I'm able to pay towards the program cost \$ _____

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2. Please indicate how you would like to pay this amount:

I can pay this amount now \$ _____

I would like to pay this amount in installments \$ _____

I am able to pay a nonrefundable deposit amount of \$ _____
(\$100 minimum deposit accepted)

I need monthly installments of \$ _____ over _____ months.
(The minimum monthly installment payment is \$20/month; 18 months is the maximum installment plan.)

Note: BreakThrough and Wisdom Years Weekend participants are strongly encouraged to join others from the weekend in the Personal Growth Group (PGG). The standard fee for participation is \$25 to cover facilitation costs.

3. **Please answer the following questions in as much detail as you feel comfortable providing.**
(optionally use a separate sheet of paper):

- Why do you want to participate in this Victories program? What do you hope to learn from this experience?

- In general terms please describe your current financial situation.

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Victories is a non-profit organization with limited funds for assistance. Our revenue from program fees does not cover our costs. This difference is made up through generous donations from our alumni community. Should your financial circumstances improve, would you be willing to consider helping other men by making a future contribution to the scholarship fund?

_____ Yes, I would consider making a future contribution when my financial circumstances improve.

If assistance funds are awarded, I agree to write a brief summary of my experience (1-2 pages) and allow Victories to potentially use the written summary for marketing and alumni communication purposes. Summary submission can be anonymous. Submission should be emailed to admin@victoriesformen.org within 30 days of completion of the program for which assistance funds were received.

_____ Yes, I am willing.

Our mission is to give many more men the opportunity to experience the benefits of our programs. Would you be willing to help Victories accomplish this by committing to recruiting at least 1 man into a weekend or other program this calendar year?

_____ Yes, I am willing.

Applicant Signature

Date

Applicant Printed Name

*Please note: All of the information provided on this financial assistance application is **confidential** and only reviewed by the Victories Operational staff. Weekend Leaders and Staff are not aware of which participants are on scholarship.*