

# ABCs of Attraction

APB Productions Inc.  
1905 Wilcox Ave #408, Los Angeles, CA 90068

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## CLIENT PAYMENT PLAN AGREEMENT

### SECTION 1: CLIENT INFORMATION

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Client Full Name:

LatinTour Date:

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Mailing Address:

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City:

State:

ZIP:

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Email Address:

Phone Number:

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LatinTour Location:

Order / Client ID (office use):

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### SECTION 2: PAYMENT TERMS

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<b>Total Program Fee</b>	\$6,000.00
<b>Non-Refundable Deposit (Due at Signing)</b>	\$500.00
<b>Remaining Balance</b>	\$5,500.00
<b>Monthly Installment Amount</b>	\$550.00 / month
<b>Number of Installments</b>	10 months
<b>Payment Method</b>	Automatic credit card charge or ACH bank transfer

2.1 The Client agrees to pay a non-refundable deposit of \$500.00 at the time of signing this Agreement. The Client's LatinTour seat is not confirmed until the deposit payment clears. ABCs of Attraction reserves the right to release the seat if the deposit does not clear within three (3) business days of signing.

2.2 The remaining balance of \$5,500.00 shall be paid in ten (10) equal monthly installments of \$250.00 each. Installments will be automatically charged to the payment method on file on the same calendar date each month, beginning one (1) month after the LatinTour date.

2.3 The Client acknowledges that by signing this Agreement, the Client accepts the full payment obligation of \$3,000.00 regardless of whether the Client attends the LatinTour.

### **SECTION 3: DEPOSIT AND CANCELLATION POLICY**

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3.1 The \$500.00 deposit is non-refundable once the LatinTour weekend begins.

3.2 If the Client cancels more than thirty (60) calendar days before the scheduled LatinTour date, the deposit may be transferred, at no additional fee, to a future LatinTour date of the Client's choosing, subject to availability.

3.3 If the Client cancels within thirty (60) calendar days of the scheduled LatinTour date, the deposit is forfeited in full with no transfer option.

3.4 All cancellation requests must be submitted in writing via email. Cancellation is effective on the date written notice is received by ABCs of Attraction.

### **SECTION 4: AUTOMATIC PAYMENT AUTHORIZATION**

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4.1 By signing this Agreement, the Client authorizes APB Productions Inc. (dba ABCs of Attraction) to automatically charge the credit card or initiate ACH bank transfers from the bank account identified in the Payment Information section of this Agreement for all installment payments due under this Agreement.

4.2 This authorization remains in effect for the full duration of the payment plan. To update or change the payment method on file, the Client must provide written notice to ABCs of Attraction at least thirty (30) calendar days before the next scheduled charge. ABCs of Attraction is not responsible for missed payments resulting from expired cards, insufficient funds, or failure to provide timely notice of payment method changes.

4.3 Full payment details are recorded in the Payment Information section at the end of this Agreement and are to be stored securely by ABCs of Attraction. This document must not be transmitted electronically and must be stored in a locked, access-restricted location.

### **SECTION 5: SERVICE DELIVERY**

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5.1 The core LatinTour service consists of two weeks of in-person instruction on the scheduled LatinTour date. Delivery of the core service is not contingent on the status of the payment plan, provided the deposit has cleared.

5.2 In addition to the core LatinTour, the Client receives the following LatinTour benefits during the payment plan period, contingent on continued payment compliance:

- (a) Attendance to the pre-LatinTour workshops;
- (b) Attendance to the Monthly Accountability meetings;
- (c) Other digital trainings specified at the time of enrollment;
- (d) Six (6) credits of training sessions; and
- (e) Two (2) bootcamp lectures only.

5.3 LatinTour benefits are suspended, without refund or credit, upon any default as defined in Section 6 below. Benefits may be reinstated at the sole discretion of ABCs of Attraction upon resolution of the default.

## **SECTION 6: DEFAULT**

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6.1 The Client is in default under this Agreement if any scheduled installment payment fails to process on the due date and is not cured within five (5) business days.

6.2 Upon default, the full remaining unpaid balance becomes immediately due and payable without further notice.

6.3 Upon default, ABCs of Attraction reserves the right to:

- (a) Suspend all LatinTour benefits described in Section 5.2;
- (b) Pursue collection of the remaining balance through small claims court in Los Angeles County; and
- (c) Refer the outstanding balance to a third-party collections agency.

6.4 The Client agrees to be responsible for any reasonable costs of collection, including court filing fees and collection agency fees incurred by ABCs of Attraction.

## **SECTION 7: GOVERNING LAW AND DISPUTES**

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7.1 This Agreement is governed by and construed in accordance with the laws of the State of California, without regard to its conflict of law provisions.



## SECTION 10: CLIENT ACKNOWLEDGMENT AND SIGNATURES

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By signing below, the Client confirms that the Client has read and understood this Agreement in its entirety, agrees to be bound by all of its terms, and acknowledges the full payment obligation of \$3,000.00 regardless of attendance.

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Client Signature / Print Name

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ABCs of Attraction Representative

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Date

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Date

# ABCs of Attraction

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## PAYMENT INFORMATION

Client Full Name:

LatinTour Date:

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### Credit Card #1

Cardholder Name:

Billing Address:

City:

State:

ZIP:

Credit Card Number:

Expiration Date:

Security Code (CVV):

Billing ZIP:

### Credit Card #2

Cardholder Name:

Billing Address:

City:

State:

ZIP:

Credit Card Number:

Expiration Date:

Security Code (CVV):

Billing ZIP:

### Credit Card #3

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code (CVV): \_\_\_\_\_ Billing ZIP: \_\_\_\_\_

### ACH Bank Transfer

Account Holder Name: \_\_\_\_\_ Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

ABA Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Type (Checking / Savings): \_\_\_\_\_ Account Holder Phone: \_\_\_\_\_

*By providing bank account information above, the Client authorizes ABCs of Attraction (APB Productions Inc.) to initiate ACH debit entries to the account listed above in accordance with the payment schedule in this Agreement.*