

student name \_\_\_\_\_

Study Abroad Program Name: Mexican culture and pre-history

Term: 08/1

**Courses, Payment Schedule, and Cancellation Policy**

**Course:**

Title	Course #	Section #	Hrs of credit
<u>Mexican Culture and Archeology</u>	<u>Ant 3531</u>	<u>101</u>	3 cr. hours

**Payment Schedule:**

\$ amount due:	date due:	
Initial deposit	<u>\$300.00</u>	submitted with completed application

* Final Payment (remaining balance) <b><u>plus</u></b> <b><u>tuition pre-payment</u></b>	<u>\$350.00+ tuition</u>	January 31, 2008
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**Cancellation Policy:**

If a student withdraws from the program prior to the final payment date, the final payment that follow the date of cancellation does not need to be met. If you cancel on or after the final payment date, you remain obligated for this payment. No refunds can be made of these funds (that is the \$300 initial deposit and final payment)

Students need to inform Faculty Program Directors in writing, with copy to Meg Kennedy at International Programs, when canceling their participation in any program.

Students are responsible for amounts owed even if they are not up to date with their payment schedule.

Students who have not paid in full the trip cost and tuition at the final payment date will not be allowed to participate in the program and are not entitled to a refund.

**I am aware that:**

- 1) my student account will be charged by the program cost in February 2008,
- 2) tuition is NOT included in the trip cost and needs to be pre-paid as part of my final payment (see payment schedule). Tuition will be charged separately at a later date to my student account after OIP registers me for the classes listed above and that tuition rates may change.
- 3) I will need approximately \$300-400 **plus airfare** to cover additional expenses not included in the program cost or tuition.
- 4) if I withdraw from the program, the cancellation policy above will apply and I will be responsible for the amount owed regardless of my financial aid status.

I certify that I am at least eighteen (18) of age, medically and mentally sound, physically fit to participate in the program for which I am applying, and competent to enter into this agreement. I further certify that no oral promise, agreement, warranty or representation concerning safety or liability has been made to me.

\_\_\_\_\_  
student signature

\_\_\_\_\_  
date

**If the participant is under eighteen (18) years of age, this document must be signed on behalf of the participant by his or her parent or guardian. I have read and understand this assumption of risk and indemnification agreement, I understand and agree that it will legally bind me and my estate, and I sign it voluntarily.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Relationship to Participant  
(Parent or Guardian)

\_\_\_\_\_  
Date