



# Financial Responsibility and Consent for Students Under the Age of 18

All students under the age of 18 must have consent from a parent/guardian prior to enrollment at a Maricopa Community college in credit, clock, or non credit courses as proof of financial responsibility and for text messaging and automated communication.

**Please be advised: Consent is valid until rescinded by the parent/legal guardian or until the student turns 18 years of age.**

Students will be required to comply with additional requirements for admission if they have not yet graduated high school or are participating in early college programs (Dual Enrollment, ACE, Hoop of Learning).

**Parent/Guardian: please review and provide all required information.**

## Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

College: \_\_\_\_\_ Student ID: \_\_\_\_\_

## Parent/Guardian Information

### Financial Responsibility:

As the parent/guardian of a minor student, I acknowledge that I have read the *Maricopa Tuition and Fees Policy* and the *Maricopa Refund Policy*.

I understand that tuition and fees are added to a student account as a result of enrolling in classes. Once registered and enrolled, if not dropped by the 100% refund deadline, I am responsible for all tuition, fees and fines charged to my student's account. Failure to attend class does not absolve me of the financial obligation as described above. Failure to resolve past due balances may result in impact on services, including holds on my student's account restricting future registration and other services; and forwarding of any unpaid past due balances to collection agencies.

Parent/Guardian Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Social Security Number (Optional): \_\_\_\_\_

\*Social security number will be kept confidential

**I understand that I am responsible for all tuition, fees, and fines that may be incurred related to my minor student's enrollment in the Maricopa Community Colleges.**     YES     NO

### Consent to Text/Call:

I give permission to the Maricopa Community Colleges to contact my student via SMS text messaging and automated calls or other methods of communication for official business to the phone number(s) on file in the student's account.

I consent     I do not consent

*Please note: All students are enrolled in the ALERT notification system in order to receive Emergency Alerts concerning health and safety of people on campuses/sites via text message. Please ensure your student provides their current cell phone number.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_