



Residence Hall Charges

Summer 2012

2500 E. Nutwood Ave.
Fullerton, CA, U.S.A. 92831
(714) 879-3901
FAX (714) 681-7421

Financial Arrangements Due By May, 1, 2012

A. Student Information

ID# _____

Student's Name

Permanent Street Address *City* *State* *Zip*

Summer Phone *Permanent Phone*

B. Housing

Room Occupancy - Quad	\$1,050.00 for Summer
Room Occupancy - Triple	\$1,155.00 for Summer
Room Occupancy - Double	\$1,260.00 for Summer
Room Occupancy - Single	\$1,400.00 for Summer
Room Occupancy - Married	\$1,600.00 for Summer
Room Occupancy for summer _____	\$ _____
Security Deposit \$400.00 (refundable upon proper checkout, new residents only)	\$ _____
Housing Processing Fee \$25.00 (onetime fee, new residents only)	\$ _____
Total Housing for the summer	\$ _____

CERTIFICATIONS

I understand that a late fee of \$40 will be charged on any rent payment received 5 days after the due date. I understand that failure to comply with the above stated terms and conditions could result in eviction from the residence halls and loss of my deposit. If the balance is not paid within 30 days of vacating the residence halls or payments subside for 30 days or more, the balance will be referred to a collection agency, which may include obtaining information from credit reporting agencies. I agree to pay all collection and attorney's fees. This authorization shall be in effect as long as a balance exists on my account.

Return completed form to Hope International University, Attn: Student Account Department

C. Payment Options (initial payment option choice)

1. _____ Single Payment. One payment for the "Total Amount Due from the Student" as indicated in Section B of this document. The single payment is due in full on or before May 15, 2012.
2. _____ Installment Payment Plan. Multiple payments equaling the "Total Housing for summer" as indicated in Section B of this document. The Installment Payment Plan Schedule is attached hereto and incorporated by reference herein.

Installment Payment Plan Option

_____ 3 month. May 15th - July 15th \$ _____ per month.
(initial)

Payment plans are due on the 15th of each month. \$40 late fees are applied on the 21st.

D. Accepted Methods of Payment (initial method of payment choice)

1. _____ **Credit Card.** The card holder herein agrees to remit payment(s) by credit card to the HIU Business Office on or before the due date outlined in the Payment Option selected by the Student in Section I of this document.

American Express Discover MasterCard Visa

Name on Card: _____

Card Number: _____

Card Expiration Date: _____

Card Security Code: _____

Card Billing Address: _____

The card holder authorizes the HIU Business Office to process payments in accordance with the Installment Payment Plan Schedule using the credit card listed above.

Card Holder's Signature _____

2. _____ **Automatic Withdrawal from Checking Account.** The account holder herein authorizes the HIU Business Office to process payments in Accordance with the Installment Payment Plan Schedule by automatically withdrawing the scheduled payment from the Account Holder's checking account. The Account Holder also agrees to provide a cancelled or voided check from this checking account if the Student has selected this method of payment.

Name of Bank: _____

Name on Account: _____

Routing ID Number: _____

Account Number: _____

The account holder authorizes the HIU Business Office to process payments in accordance with the Installment Payment Plan Schedule using the checking account card listed above.

Account Holder's Signature _____

E. Promissory Note

I, _____, understand that the fees and/or charges stated herein are based on my selections. Any changes to the number of units, the housing plan, the meal plan, and/or the student fees may result in changes to the amount due and owing to HIU. I also understand that it is my responsibility to request any changes to the estimated amounts through HIU's Student Accounts/Financial Aid Office. I further understand that all fees and/or charges are due at the beginning of the academic term, unless I have made payment arrangements as indicated herein. I acknowledge that failure to meet payments due to the University as indicated on this form (item I) could result in being removed from class, dormitory, and cafeteria privileges. Finally, I understand that I must have a zero balance on my account by the end of each academic term.

If I have selected the Installment Payment Plan Option, I herein agree to make the payments indicated by the Installment Payment Plan Schedule. If my account is not paid when due in the amount due, then I acknowledge and understand that I will be responsible for all costs incurred by HIU to collect the unpaid balance due and owing. I also understand that such costs may include, but are not limited to, late fees, collection costs, attorney fees, and court costs.

F. Signature(s)

The Student herein acknowledges, understands, and agrees that (1) the Student has made the informed selections indicated herein, (2) the Student has been given ample opportunity to discuss the contents of this documents with the Student's parent(s), guardian, spouse, and/or other individual(s) of the Student's own choosing before executing this document, (3) the information provided by the Student herein is true and correct, and (4) the Student will abide by the terms and conditions set forth in this document.

Executed on the date(s) indicated below in the City of Fullerton, County of Orange, and State of California.

STUDENT

Signature of the Student

Printed Name of the Student

Date

*Signature of the Student's Parent or Guardian if the Student
Is Under 18 Years of Age*

Date