CONSENT FORM

Please initial each item:

- 1.____ I understand that all participants in the Ithaca College Los Angeles Program will be responsible for their own travel arrangements to and from Los Angeles, and all transportation needs while in Los Angeles, and for the charges involved.
- 2.____ I understand that Ithaca College will provide housing for participants in the program, and that participants will be responsible for the cost. The cost of housing will be specified on the Information Sheet for the semester for which the participant is applying.
- 3.____ I understand that participants must live in the College housing provided and abide by housing regulations.
- 4.____ I understand that participants are responsible for the cost of meals, laundry, books, supplies, telephone, and incidentals.
- 5.____ I understand that the College reserves the right to cancel or alter any or all of the aspects of this program and/or alter its schedule of charges should unforeseen circumstances warrant such action.
- 6.____ I understand that there are credit hour enrollment minimums and maximums, described in the Information Sheet for the semester for which the participant is applying.
- 7.____ I understand that, before this application will be considered, all participants must be in good academic, judicial and financial standing at the College or their current school of enrollment.
- 8.____ **Ithaca College students:** I agree to meet the schedule of payments in connection with this program as provided by the Ithaca College Student Financial Services. Ithaca College's normal billing procedures will be followed and regular tuition and fee rates will be.

I have read all the materials provided about the	I have read all the materials provided about the
program as well as the information above, and I	program as well as the information above, and I give
agree to participate in the program under these	my son/daughter/ward permission to participate, and I
terms.	agree to these terms.
STUDENT'S SIGNATURE DATE	PARENT/GUARDIAN'S SIGNATURE DATE (Required if student is not responsible for bills)

Student's name typed or printed

Parent/Guardian's name typed or printed