

Frontier Community College
Lincoln Trail College
Olney Central College
Wabash Valley College
Workforce Education

Financial Responsibility Form

I acknowledge that by completing registration for classes I am entering into a legal binding contract with Illinois Eastern Community Colleges #529 to pay all tuition, fees, bookstore charges, and related expenses by the payment due date. I understand that if I do not drop my classes within the allowable tuition cancellation period (which is normally the first 10 days of fall/spring semester, the first 5 days of summer semester, or such period as determined by the Records Office on courses offered outside the regular 16-week schedule) then I am financially obligated to pay for the courses even if I never attend any class sessions. Should I default on payment, I understand that I shall be responsible for all collection costs and legal fees that IECC may incur to collect any unpaid balance. Collection costs range between 25% and 33% of amount owed. I further acknowledge that any money owed IECC under a payment plan constitutes an educational loan that cannot be discharged in federal bankruptcy.

receiting that rain at least 10	s years or age.	
Signature:		Date:
Print Name:		-
Student ID: (optional)		
Parent/Guardian Signature:		
i areng Saaralah Signature.	if under 18 years old	

I cortify that I am at loast 19 years of ago