

MASTER PROMISSORY NOTE

I understand that I am registering for educational courses at the University of La Verne. I hereby acknowledge and agree that I am fully responsible for the cost and expense of all tuition, fees, housing, meal plan costs and other related educational expenses associated with my enrollment. I further understand that financial arrangements for my balance are due by the deadline that is published in the university catalog for the semesters/terms that I am enrolled.

The University considers any unpaid balance an extension of credit and equivalent to an educational student loan. By executing the Master Promissory Note, you are agreeing to pay all the tuition and fees representing the balance of your account. The following terms and conditions apply:

1. I acknowledge that I will not be allowed to register for a subsequent semester/term if I have not paid the balance in full for the previous semester/term or made the appropriate financial arrangements.
2. I understand that the University may withhold further services until payment is rendered as agreed. Services include, but are not limited to: the issuance of my grades, transcripts, diploma(s) and future enrollments.
3. I understand that in the event I withdraw from the University, I shall do so according to the schedule established by the University, which is available at www.laverne.edu/registrar, under Academic Calendar. If I withdraw after the established deadline, I hereby agree to pay the University for any and all tuition and mandatory fees associated with these classes.
4. I understand that in the event I withdraw from the University, I must notify the University Housing Office in writing to cancel my housing contract and understand that I am responsible for paying all housing costs according to my housing contract.
5. I understand that if I incur any additional charges that may increase or create a balance (i.e., bank returned checks, housing damages, parking citations, miscellaneous costs or reversal of financial aid), I am solely and fully responsible for payment of these charges.
6. I understand that the Office of Student Accounts shall create a payment schedule under which I can make deferred payments toward the balance of my account in order to repay the University. Due dates shall be set in accordance with the payment schedule established by the University. In the event I fail to make payment when due, the University shall assess late fee(s) as disclosed in the University catalog. I agree to pay interest on the unpaid balance of 15% per annum (computed on the basis of a 365 day year).
7. I understand and agree that the University may use a collection agency, which is subject to the Fair Debt Collection Practices Act. This account may be reported to the credit bureaus as allowed by the Fair Debt Credit Reporting Act, and may have a negative impact on my credit rating.
8. I acknowledge and agree that the terms and conditions, including rights and remedies, under this Master Promissory Note will also apply to any third party to whom the University may assign this note.
9. I agree to waive the statutes of limitations as a defense to any demand for payment under the terms of this contract.
10. I agree that this Master Promissory Note creates certain financial responsibilities and that such financial responsibilities are not dischargeable in accordance with the United States Bankruptcy Code in any bankruptcy proceeding before the United States Bankruptcy Court.
11. This Master Promissory Note shall be construed in accordance with California law, and any lawsuit to collect an unpaid balance may be brought in the appropriate court setting in the State of California regardless of my

domicile at the time of bringing such suit. In the event of litigation, I agree to pay all costs associated with such, including but not limited to, attorney and legal fees.

12. I understand that I am responsible for maintaining my current address and phone number either by writing or via the University website. I authorize the School, the Department, and their respective agents and contractors to contact me regarding my tuition accounts including repayment of my tuition account(s), at the current or any future number that I provide for my cellular phone or other wireless device using automated telephone dialing equipment or artificial or pre-recorded voice or text messages.

13. I understand that if I do not sign and complete this Master Promissory Note, I will not be permitted to register for class(es).

By signing and completing this page, I signify my understanding and agreement to all of the terms and conditions in the Master Promissory Note.

Student's Name (Please Print) Student ID #

Student's Signature Date Birth Date

Permanent Address Driver's License #

City State Zip

Local Address (If different from above)

City State Zip

Home Phone # Cellular Phone #

Personal Email Address Social Security #

If I am under the age of 17 at the time this Master Promissory Note is executed, my parent or legal guardian must also sign.

Parent or Guardian's Name (Please Print)

Parent or Guardian's Signature Date

Permanent Address Home Phone #

City State Zip