



# Billing Information & Release Form

We will send statements and release financial information only to parties listed below. **Please include email addresses; e-bills are the official means of distributing student account statements.** If no parent/guardian information is included, statements will be sent only to the student.

## Student information

Name \_\_\_\_\_

Reed ID \_\_\_\_\_

Address \_\_\_\_\_

Cell phone \_\_\_\_\_

City \_\_\_\_\_

Home phone \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

## Parent information (please list separately)

### Parent/Guardian 1

Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Work phone \_\_\_\_\_

Address \_\_\_\_\_

Cell phone \_\_\_\_\_

City \_\_\_\_\_

Home phone \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

### Parent/Guardian 2

Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Work phone \_\_\_\_\_

Address \_\_\_\_\_

Cell phone \_\_\_\_\_

City \_\_\_\_\_

Home phone \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

*I authorize the Reed College business office to release financial information regarding my tuition account to the above parties. I understand that if my business office account is delinquent, the balance may be turned over to a collection agency. If this occurs, I am responsible for all costs and attorney fees incurred in the collection process.*

Student signature \_\_\_\_\_ Date \_\_\_\_\_