

Collegium Registration 2018-19

1. Name (please print): _____ Biola ID: _____

Phone: _____ Biola Email (please print): _____

Birth Date (mo/day): _____ Sex: F M Commuting from (city): _____

Year in School: FR SO JR SR SR+ Grad Major: _____

Transfer Student Yes No Veteran Yes No First-Generation Student Yes No

Have you lived in Biola On-Campus Housing or Biola Apartments? Yes No

Student Staff have access to this info for departmental purposes, to keep this info private, ✓ here:

Interested in: Study Groups Women's & Men's small groups Sports & Workouts

Volunteering in the Collegium Transfer events Veterans Programs On-campus work

2.

MEMBERSHIP CHOICES - Please ✓ One

Year Membership (Fall + Spring) \$125

Fall Membership \$75

Spring Membership \$75

ADD ON: Semester Locker Rental..... \$20

ADD ON: Year Locker Rental \$30

Locker Assignment & Agreement Forms must be signed at the Collegium Front Desk

3. **PAYMENT OPTIONS:** Please Check One

- Bill Membership Fee to my Biola Student Account.**
- Pay by Check:** Please make checks payable to **Biola University**. Memo portion, write **"Collegium" and your name.**
- Pay by Cash:** Please pay at the Collegium front desk in the Upper Student Union.

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- First Gen Scholarship:** If you have been awarded a scholarship by Commuter Life. The Dir. will notify you.
 - OCCA/CLS Scholarship:** If you are a current Commuter Life Staff Team member. The Dir. will notify you.
 - Commuter Senator Scholarship:** if you are a current Commuter Senator in SGA. The Dir. will notify you.
 - Married Couple:** Full year - \$75 each for a total of \$150, 1-semester option will be \$45 each for a total of \$90
 - Ahmanson Veterans Scholarship Recipient** - Questions? Contact Financial Aid: finaid.scholarships@biola.edu

4.

Please ✓ Stating: "I have read the **Collegium Guidelines**, and signed the **Community Agreement**"
Please Submit a signed copy of the **Community Agreement** with your **Registration Form**

SIGNATURE: _____ DATE: _____

Return signed Registration Form and Community Agreement to The Collegium (during the school year)
or mail to: Commuter Life, Biola University, 13800 Biola Ave, La Mirada, CA 90639.

FOR STAFF USE: Amount \$ _____ = Account Billing; Check #: _____; Cash; Staff/Senator; Scholarship
Received by (staff name): _____; Receipt issued by (staff name): _____; (Entered in DB: (JA only) _____)