

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

**STUDENT BUSINESS SERVICES
ELECT TO PAY FORM**

Name: _____

ID Number: R

Semester: _____

I understand that I have the option to elect to pay for any fees that were previously waived on my account in order to utilize services. I further understand that making the election to pay any of the fees listed below also requires the payment of the ID Card Fee in order to take effect. I do hereby exercise this option and I understand that this decision is irrevocable (non-refundable). I also understand that these amounts are based upon semester credit hours for which I am enrolled at the time of submitting this request. Student Business Services will verify enrollment in the semester indicated. This form is only valid for the semester indicated.

I elect to pay additional charges (amounts) for the fees indicated below:

- Recreation Center Fee
- Medical Services Fee
- Student Athletic Fee
- Student Union Fee
- Student Services Fee
- ID Card Fee

Please click _____ to email the completed for or sign completed form and return to TTUHSC Student Business Services Office, PO Box 5868, Lubbock Texas, 79408.

Student Signature

Date

I understand any fee I elect to pay will take 2-3 days to process before use. I also understand I am responsible for checking my student account and paying the fee I have elected to have added to my account within 2-3 business days and if I do not, I may access a late payment fee.

TTUHSC Student Business Services Use Only

Date Entered: ____ / ____ / ____

Entered By: _____

- Recreation Center Fee H430
- Medical Services Fee H448
- Medical Services Fee-Abilene/Dallas H449
- Student Athletic Fee H436
- Student Union Fee H423
- Student Services Fee H443
- Student Services Fee-Abilene/Amarillo/Dallas H438
- ID Card Fee H456
- Student Services Fee - Midland PA H46A
- Student Services Fee - Odessa PT H46B
- Student Services Fee - Odess NR(UG) H46C