

Authorization to Invoice (PLEASE COMPLETE ALL APPLICABLE BOXES)

Account (Sponsoring Agency) Information:		
Account name:	Account #:	
Billing address:		
City:	Province:	Postal code:
Sponsor contact name:	Phone:	Email:
Financial contact name:	Phone:	Email:
If your agency is tax exempt, please provide the Tax Exempt #	Number:	

Customer (Student) Information:		
Student name:	Student #:	
Student address:		
City:	Province:	Postal code:
Home phone:	Cell phone:	
Program:	Start date:	End date:
<i>In compliance with the Manitoba Freedom of Information and Protection of Privacy Act (FIPPA), RRC cannot release students' personal or academic information to a third party without the written consent of the student.</i>		

Financial Information and Terms:		
<i>We hereby agree to be invoiced for, and pay Red River College all charges pertaining to those fees indicated below.</i>		
Program fees/Tuition:	\$	Indicate amount covered.
Books/Supplies:	\$	Indicate amount covered.
Locker:	\$	Indicate amount covered.
Parking:	\$	Indicate amount covered.
Residence/Campus Living:	\$	Indicate amount covered; see <a href="https://blogs.rrc.ca/housing">blogs.rrc.ca/housing</a> for more information
Health and Dental**	\$	Indicate amount covered; see: <a href="https://mystudentplan.ca">mystudentplan.ca</a> for more information.
For opt out visit: <a href="https://mystudentplan.ca/redriver/en/waiver-form">https://mystudentplan.ca/redriver/en/waiver-form</a>		
<b>IMPORTANT</b> <i>Deposits must be paid in full or a completed sponsorship form received prior to the deposit deadline indicated on the student's offer letter. Red River College reserves the right to withhold sponsorship(s) from sponsor(s) with outstanding balances more than (60) days. Students are responsible for all fees that are NOT covered by the Sponsor.</i>		

Authorized signature:	Date (dd/mm/yy):
Print authorization name:	

E-mail completed form to RRC Controller's Office, Sponsor Administrator

P: 204.632.2371 | [E: arpayts@rrc.ca](mailto:arpayts@rrc.ca)