

**MassPirg WAIVER**

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
STUDENT ID NUMBER

 **XX**

I would like to WAIVE  
the MassPirg CHARGE

\_\_\_\_\_  
SEMESTER

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

The MassPirg charge on your bill appears by vote of the student body and does not represent the endorsement of the college or its Board of Trustees. Payment is not required by law.

If you wish to waive this fee, please check above, sign and submit to:

MCLA  
Student Accounts/Bursar's Office  
375 Church Street  
North Adams, MA 01247