



Louisburg College Bookstore Voucher Program

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| Student Name | |
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| Semester | Current semester | Book Number | |
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Statement of Student Responsibility

*I agree that I have received my textbooks from Louisburg College Bookstore for the current semester. I agree to return all textbooks no later than the last day of exams of the current semester. In the event I do not return all items to the Bookstore by the last day of exams my student account will be charged for the full current retail value of the textbooks. **In the event I am due a refund Louisburg College will withhold adequate funds on my student account to cover the costs of books until the books are returned.** I can write and highlight in my textbooks, however I can not tear any pages out.*

Student Signature

Date

Book Return Information:

All returned: () Yes () No Book Charges Due: \$_____

Student Signature

Date

Bookstore Signature

Date