

Student Registration and Medical Release Form

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Student Name:					
Gender (circle one): M F					
Parent/Guardian Name:					
Address:					
City:	State: Zip:				
Home Phone: ()	Business Phone: ()	If parent/guardian is unavaila	ble in case of an emergency, please contact:		
Student Birth Date:/	/ Grade in School:	Name:	Name:		
Home Church:		Relationship:	Phone:()		
City:	State:				
event, I give my permission fo			articipation. If medical attention is required for illness or injury while attending this Date:		
that images used are consider	ed the property of Cedarville University and a	may not be sold or reused without the exp	·		
Parents/guardians who have sp any issues regarding the use of th	ecial concerns or requirements regarding photogheir student's image.	raphy of their student agree to contact Ceda	rville University in advance of the event to resolve		
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What to Bring:	laptoppencil, notebookacademic suppliessleeping bag/linens/ pillow (twin bed)	 umbrella towels personal items comfortable clothes comfortable shoes 	 modest bathing suit trash can spending money signed medical release form 		
What to Wear:	program activities. Short	st casual dress including blue jeans, shorts, and t-shirts are acceptable for am activities. Shorts should be no shorter than halfway between the top of ee & top of the thigh. Exposed midriff-style shirts are not permitted.			

Campus Contact Information

Event Services: 937-766-4444 | Event Staff Cell Phone: 937-244-7198*

*The cell phone will only be in use during the event.