

RESERVATION FORM FOR COLLEGE UP CLOSE TRIP

<i>Office use only</i>
DT _____
CL _____
WL _____
CK / MO / CC _____
CK# _____

What dates you will be coming for College Up Close: _____

Method of travel: BJU motor coach BJU commercial airline flight other transportation

In what city will you meet the BJU motor coach (if applicable)? _____

Please list the name(s) of your parent(s) who will be accompanying you on this trip: _____

Student's name Mr. Miss _____
FIRST MIDDLE LAST NAME YOU GO BY

Home address _____

City _____ State _____ Zip _____

Home phone () _____ Cell phone () _____

Email _____ Church you attend _____

High school _____ Grade in school _____

Date of birth / / _____

What do you plan to study in college? _____

Do you have any family members who are currently students at BJU? If so, please list name(s) and relationship(s) to you below; we will use this information to let them know about your visit and your schedule.

Full name _____ Relationship _____

Full name _____ Relationship _____

Full name _____ Relationship _____

Room requests must be made one week before the event. *I would like to room near:* _____

Trip participants must agree to remain on campus and under the authority of the university host.

Payment: Total for student (and parent(s) if applicable) \$ _____

In order to guarantee my reservation, I am paying by:

Check or Money Order enclosed (payable to BJU) Discover VISA MasterCard

Card # _____ Exp. date _____

Name as printed on card _____

Signature _____

Medical release: *I authorize Bob Jones University to act for me according to its best judgment in any emergency requiring medical attention. I understand that BJU is not responsible for any expense incurred because of any injury or illness.*

Student's name Mr. Miss _____
FIRST MIDDLE LAST NAME HE/SHE GOES BY

Parent's or legal guardian's signature: _____

Parent's or legal guardian's name (please print): _____ Relationship _____

Home phone () _____ Work phone () _____

Cell phone () _____

Please list any medical conditions: _____

Please fill this form out completely and return to **Student Recruitment, BJU, Greenville, SC 29614-0001** or fax to **864-242-3923**.