Check #_____

# COLLEGE TOUR REGISTRATION FORM

Student's Name _____
(Last Name) (First Name) (M.I.)

Address_____ Apt#_____ Zip Code_____

Home Telephone _____ Cell Phone_____

Student Cell phone, if applicable _____

Date of Birth_____ Age_____ Gender: Male ☐ Female ☐

**T-Shirt Size**: (Adult Sizes Only)

| Small | Medium | Large | X-Large | XX-Large | 3X-Large | 4X-Large |
|---|---|---|---|---|---|---|
| | | | | | | |

**Race/Ethnicity**:

___ African-American ___ Asian ___ Bi-racial ___ Hispanic/Latino

___ Native American ___ Somalian ___ White ___ Other _____

**School** _____

**Address** _____ **Contact #** _____

**I UNDERSTAND THAT MY CHILD'S PARTICIPATION IN *COLLEGE TOURS 4 ALL* IS VOLUNTARY. I ALSO UNDERSTAND THAT *COLLEGE TOURS 4 ALL* IS NOT RESPONSIBLE FOR ANY VALUABLES MY CHILD MAY BRING IN ANY *CT4A* ACTIVITY.**

**Parent/Guardian Name** _____
**(Please Print)** **(Relationship)**

**Parent/Guardian Signature** _____ **Date** _____

**Staff**_____

**For Office Use Only:**

**DATE OF REGISTRATION**_____ **PAID DEPOSIT: Y** ____ **N**____

**CHECK #** _____