

**Important:** This completed form must be received by DSU if you plan to attend Hornet Days.

**YOU WILL NOT BE ALLOWED ON THE BUS OR TO PARTICPATE IN THE DAY, IF WE HAVE NOT RECEIVED YOUR COMPLETED PERMISSION SLIP.**

Please print and hand deliver when you get on the bus or print and fax the form to 302-857-6352. **Please print legibly.**

Last Name	Middle Initial	First Name
Street Address		
City	State	Zip Code
Home Number		Cell Number

**2011 Hornet Days Schedule**  
Please choose which date you would like to attend below.

<b>Pennsylvania</b>	Friday, February 4, 2011 _____	<b>Maryland, DC, Virginia</b>	Wednesday, February 9, 2011 _____
<b>New Jersey</b>	Friday, February 18, 2011 _____	<b>New York</b>	Wednesday, February 23, 2011 _____

**Counselor's Section**

I support \_\_\_\_\_ 's decision to participate in DSU Hornet Days for prospective  
*(Students Name)*

students on \_\_\_\_\_ at Delaware State University. I believe that he/she will exhibit exemplary  
*(Date of Visit)*

character, leadership and would benefit by attending. I recommend this student without any reservation.

**Cumulative weighted GPA:**

If applicable:

SAT Math Score \_\_\_\_\_ Critical Reading Score \_\_\_\_\_ and/or ACT Composite Score \_\_\_\_\_

\_\_\_\_\_  
Counselor's Signature Date

\_\_\_\_\_  
High School Contact Number of Counselor

**Parent's Section**

I have read and understand the above notice pertaining to my student's involvement in DSU Hornet Days. I give my child permission to ride the bus reserved by DSU to and from the DSU Hornet Days for prospective student activities.

\_\_\_\_\_  
Parent Signature Date

\_\_\_\_\_  
Daytime Contact Number of Parent | Evening Contact Number of Parent

**Thank you for your interest in visiting Delaware State University for Hornet Days!**

**PLEASE NOTE:** Visiting students will not be chaperoned by faculty, staff or other University administrators at all times. Visiting students will be hosted by a student currently enrolled at DSU. Please carefully read and sign the following:

I hereby authorize any actions which may be advised/recommended by a physician or other health care provider attending my child during the activities described in the itinerary. I hereby assume all risks to me or my child or personal injury and property damage or loss related to Hornet Days for Prospective Students activities. I agree to indemnify and hold harmless DSU, its trustees, officers, agents and employees from and against any and all claims or causes of action of any kind or nature whatsoever, and expenses, including attorneys' fees, arising or claimed to have arisen out of any injuries or damages sustained by my child or me, regardless of cause (including negligence on the part of any person identified above) and any injuries or damages received or sustained by the University or any other person or persons or property, as a result of intentional or negligent acts or omissions of my child or me. I also give DSU permission to utilize any photograph of my child for promotional use. I understand that my child must abide by all DSU rules and regulations, including its Code of Conduct. I understand that my child's failure to adhere to such rules and regulations may result in immediate dismissal from the DSU Hornet Days for Prospective Student activities and that I will be responsible for providing transportation for my child's return home upon my receipt of notice of such dismissal.