



Form Due: Friday, June 9, 2012

PRE-COLLEGE SUMMER INSTITUTE

This form is required of all students and must be completed by a parent or guardian. Failure to complete this form honestly and in its entirety will result in removal of the student from the program.

320 South Broad Street, Philadelphia, PA 19102 • 215-717-6430 • cs.uarts.edu

Student Information: Commuter Resident

Name _____

Program Attending: Acting Art, Media + Design Dance

Music Musical Theater Commuter Intensives

Address _____

City _____ State _____ Zip _____

Home Telephone _____

Student's Cell Phone _____

Social Security Number _____

Date of Birth: / / male female

Family Physician Information

Name of primary care physician:

Name _____

Telephone _____

Fax _____

Name of Specialist and Specialty*:

Name _____

Specialty _____

Telephone _____

Fax _____

* You may add a separate sheet if necessary.

Emergency Contact #1

Primary person to be notified in case of emergency at any time:

Name _____

Relationship to student: Father Mother Grandparent

Legal Guardian Other _____

Home Telephone _____

Work Telephone _____

Cell Phone _____

Email Address _____

Emergency Contact #2

Secondary person to be notified in case of emergency at any time:

Name _____

Relationship to student: Father Mother Grandparent

Legal Guardian Other _____

Home Telephone _____

Work Telephone _____

Cell Phone _____

Email Address _____

Emergency Contact #3

Third person to be notified in case of emergency at any time:

Name _____

Relationship to student: Father Mother Grandparent

Legal Guardian Other _____

Home Telephone _____

Work Telephone _____

Cell Phone _____

Email Address _____

As the parent/guardian of _____
I hereby consent to the release of any/all information, including private health information, to employees of the University of the Arts to ensure the health and/or safety of my son/daughter.

Parent/Guardian signature

Signature _____ Date _____

Print name

Student's signature

Signature _____ Date _____

Print name