

# Georgia College & State University

Registration Form | FAMILY DAY 2009 | Saturday, October 24

Registration Deadline: Friday, October 9, 2009

## Georgia College Student Information:

\_\_\_\_\_  
Student Name

(\_\_\_\_\_) \_\_\_\_\_  
Phone Number (Local or Cell)

\_\_\_\_\_  
Student Email Address @ \_\_\_\_\_

## Registration Confirmation Information:

Please list information for one guest only. All confirmation materials will be sent to this individual.

\_\_\_\_\_  
Name

(\_\_\_\_\_) \_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, & Zip Code

\_\_\_\_\_  
Email Address @ \_\_\_\_\_

## Guest Information:

Please print each guest name, as you would like it to appear on nametags including the individual receiving confirmation:

\_\_\_\_\_  
Guest 1

\_\_\_\_\_  
Guest 2

\_\_\_\_\_  
Guest 3

\_\_\_\_\_  
Guest 4

\_\_\_\_\_  
Guest 5

\_\_\_\_\_  
Guest 6

## Payment Information:

There is no charge for your Georgia College student to participate, please do not include in total.

Total guest #: \_\_\_\_\_ X \$15 = \$ \_\_\_\_\_

Make check or money order payable to **GCSU** and mail to:

**Family Day**  
**Office of Student Affairs**  
**Georgia College & State University**  
**Campus Box 027**  
**Milledgeville, GA 31061**

## FOR OFFICE USE ONLY:

Entry complete: \_\_\_\_\_ Date: \_\_\_\_\_

Payment deposited: \_\_\_\_\_ Date: \_\_\_\_\_

Confirmation mailed: \_\_\_\_\_ Date: \_\_\_\_\_

Nametags printed: \_\_\_\_\_ Date: \_\_\_\_\_