

Orientation Reservation
Veteran Orientation
August 6, 2009

Name: _____

Address: Street _____

City: _____ State: _____ Zip Code _____

Email Address: _____

Name preferred for Name Badge: _____

Major: _____

Family Member Reservation:

Guest Name: _____

Guest Email: _____

Disability Information (If a student or guest has a disability-related need and will require assistance, please detail the type of assistance needed):