

preview weekend 2011 emergency contacts

Student Name _____ Gender M/F (circle appropriate)
(first) (last)

Address _____

(city) (state)

Email Address _____ Phone _____ / _____
(home phone) (cell phone)

family contact

Name _____ Relation _____

Mailing Address Same as mine, above.

Street _____

City _____ State _____ Zip _____

Contact Information

Phone (_____) _____ — _____ Home Cell Other _____

Email _____

This family member(s) will be attending Preview Weekend with me, and staying at

_____ and their cell phone number is (_____) _____ — _____

additional emergency contact

Other than the family member(s) listed above, in case of emergency, please contact this person.

Name _____ Relation _____

Phone (_____) _____ — _____ Home Cell Other _____

Email _____

Please return this and the consent and release form by **Monday, April 4.**

Materials should be faxed or scanned and emailed to:

Office of Undergraduate Admission
ATTN: Natalie Zeller
Phone: 800.448.2329 Fax: 312.567.6939
nzeller@iit.edu

