

# STAIR Session Housing Registration Form

Please complete this form and return it with your payment at least one week prior to the date of the housing program you select below. Send this form and your payment to: Residence Life and Housing, 4201 Grant Line Rd, Meadow Lodge 103, New Albany IN, 47150

## **PARTICIPANT INFORMATION:**

PARTICIPANT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

CONTACT PHONE WHILE STAYING ON CAMPUS: \_\_\_\_\_

EMERGENCY CONTACT NAME AND PHONE: \_\_\_\_\_

EMERGENCY CONTACT ALTERNATE NAME AND PHONE: \_\_\_\_\_

## **ROOM COST**

Please place a check mark next to the session for which you are registering

<input checked="" type="checkbox"/>	<b>Stair Session Dates</b>	<b>Night of Housing Program</b>
	May 21 <sup>st</sup>	May 20 <sup>th</sup>
	June 8 <sup>th</sup> & June 9 <sup>th</sup>	June 8 <sup>th</sup>
	June 14 <sup>th</sup> & June 15 <sup>th</sup>	June 14 <sup>th</sup>
	June 18 <sup>th</sup>	June 17 <sup>th</sup>
	July 15 <sup>th</sup> & July 16 <sup>th</sup>	July 15 <sup>th</sup>
	July 27 <sup>th</sup> & July 28 <sup>th</sup>	July 27 <sup>th</sup>

The cost of the program is \$35 per person per night

How many people will be staying in housing on the above date? Participants \_\_\_\_\_ Guests \_\_\_\_\_

Will you require an extra night stay? YES NO If yes, please list date of stay here: \_\_\_\_\_

Would you like free wireless internet access? YES NO

## **IMPORTANT INFORMATION:**

- Payments may be made by check or money order made payable to Indiana University. If you need to learn about payment options please contact our office.
- All guests are expected to follow the policies, rules, and regulations in the Guide to Residence Hall Living. A copy will be provided to you at check-in but is also available through the Housing web page at [http://www.ius.edu/housing/article/RL\\_Handbook](http://www.ius.edu/housing/article/RL_Handbook).
- Contact Jen Crompton, Assistant Director of Residence Life, at [jcrompto@ius.edu](mailto:jcrompto@ius.edu) or 812-941-2115 with any questions.

## **CONTRACT AGREEMENT:**

By signing below, I acknowledge agreement with terms and conditions of this Agreement for housing at IU Southeast including the provisions of the *Guide to Residence Hall Living*. This Agreement is made and entered into by and between the Trustees of Indiana University and the undersigned participant or guardian for housing **for the STAIR Housing Program. It is agreed and understood that the participant will be financially responsible for the amount above in full unless cancellation is submitted in writing at least 2 weeks in advance.** I have read, understood, and agreed to the terms of this Housing Agreement.

Participant signature \_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_  
Legal guardian signature if student is under 18