

**2016 Hilltopper Academy  
Registration Form  
July 31-August 5**

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Print CLEARLY & Return by mail to: **Liz Richter, West Liberty University, Box 112, 208 University Drive, West Liberty, WV 26074 (Space available on a first-come, first-serve basis).**

\_\_\_ Yes, I have enclosed my non-refundable \$50 registration fee (Make check payable to **WLU**. Fee is non-returnable.)

Name: \_\_\_\_\_  
*Last First MI Preferred Name*

Address: \_\_\_\_\_  
*Number and Street and/or PO Box*

\_\_\_\_\_ *City State Zip*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Intended Major: \_\_\_\_\_

**Emergency Contact Information**

Full Name and Relationship of Emergency Contact to Applicant:

\_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

**My signature below confirms I understand ...**

- I am registering as a participant in WLU's **2016 Hilltopper Academy, July 31-August 5**.
- I **must pre-register for Fall 2016 as a full-time student (12 hours or more) before I can participate in Hilltopper Academy**. (If not pre-registered, contact Admissions at 304.336.8076)
- I am agreeing to **reside on campus** for the length of the academy and to **observe all written and stated policies**.
- **One elective credit hour will be** awarded for completion of the academy. Credit is awarded **only upon "successful" completion of all aspects of the program**.
- I am agreeing to allow WLU to use demographic and performance data about me for internal statistical and evaluative purposes.
- Students are selected for participation based on pre-determined criterion and are enrolled on a **first-come, first-serve basis**.

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Full Name: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_ Date \_\_\_\_\_